



Indicator Analysis 2023

Annual report of the certified Gynaecological Cancer Centres

Audit year 2022 / Indicator year 2021

Table of Contents

Introduction	3
General information.....	3
Status of the certification system for Gynaecological Cancer Centres 2022.....	5
Clinical sites taken into account.....	6
Tumour documentation systems in the Centres' clinical sites.....	7
Analysis of basic data.....	8
Analysis of indicators.....	12
Indicator No. 1: Presentation tumour board.....	12
Indicator No. 2: Psycho-oncological counselling (session \geq 25 min).....	13
Indicator No. 3: Social service counselling	14
Indicator No. 4: Patients enrolled in a study.....	15
Indicator No. 5: Total case number	16
Indicator No. 6a: Primary cases	17
Indicator No. 6b: Non-primary cases.....	18
Indicator No. 7: Surgical cases	19
Indicator No. 8: Offering of genetic testing (GL ovary QI).....	20
Indicator No. 9: Surgical staging early ovarian cancer (GL ovary QI).....	21
Indicator No. 10: Macroscopic complete resection advanced ovarian cancer (GL ovary QI).....	22
Indicator No. 11: Operation advanced ovarian cancer by a gynaecological oncologist (GL ovary QI).....	23
Indicator No. 13: First-line chemotherapy of advanced ovarian cancer (GL ovary QI).....	24
Indicator No. 14: Details in the pathology report in the case of first diagnosis and tumour resection (GL cervix QI).....	25
Indicator No. 15: Details in the pathology report in the case of lymphonodectomy (GL cervix QI).....	26
Indicator No. 16: Cytological/histological lymph node staging (GL cervix QI).....	27
Indicator No. 17: Brachytherapy as a component of primary radio(chemo) therapy.....	28
Indicator No. 18: Histological confirmation of local recurrence (GL cervix QI)	29
Indicator No. 19: Details in pathology report in the case of initial diagnosis and tumour resection (GL vulva QI).....	30
Indicator No. 20: Details in pathology report in the case of lymphonodectomy (GL vulva QI).....	31
Indicator No. 21: Conduct inguino femoral staging (GL vulva QI).....	32
Indicator No. 22: Sentinel lymph nodes biopsy (GL vulva QI)	33
Indicator No. 23: Systematic lymphadenectomy (LNE) for type-I-endometrial carcinoma (GL endo. QI)	34
Indicator No. 24: Adjuvant chemotherapy for type-I-endometrial carcinoma (GL endo QI).....	35
Indicator No. 25a: Hysterectomy without morcellement for sarcoma confined to the uterus (in the centre) (GL Sarkom QI).....	36
Indicator No. 25b: Hysterectomy without morcellement for sarcoma confined to the uterus (outside the centre) (GL Sarkom QI).....	37
Impressum	38

General information

Indicator No. 1: Presentation tumour board
 Indicator No. 2: Psycho-oncological counselling (session ≥ 25 min)
 Indicator No. 3: Counselling social services
 Indicator No. 4: Study participation
 Indicator No. 5: Total case number with a genital malignoma
 Indicator No. 6: Primary cases with a genital malignoma
 Indicator No. 7: Surgical cases with a genital malignoma
 Indicator No. 8: Surgical staging early ovary carcinoma (GL ovary QI 1)
 Indicator No. 9: Macroscopic complete resection advanced ovary carcinoma (GL ovary QI 3)
 Indicator No. 10: Surgery advanced ovary carcinoma (GL ovary QI 4)
 Indicator No. 11: Post-surgical chemotherapy advanced ovary carcinoma (GL ovary QI 5)
 Indicator No. 12: No adjuvant chemotherapy of early ovary carcinoma (LL ovary QI 6)
 Indicator No. 13: Platin-containing chemotherapy early ovary carcinoma (GL ovary QI 7)
 Indicator No. 14: First-line chemotherapy of advanced ovary carcinoma (GL ovary QI 8)

Quality indicators of the guidelines (GL QI):

In the table of contents and in the respective headings, the indicators which correspond to the quality indicators of the evidence-based guidelines are specifically identified. These quality indicators are based on the strong recommendations of the guidelines and were derived from the guidelines groups in the context of the German Guideline Programme in Oncology (GGPO). Further information: www.leitlinienprogramm-onkologie.de *

	Definition of indicator	All clinical sites 2014	
		Median	Range
Numerator	All surgically treated primary cases presented in the tumour conference	151*	46 - 801
Population	Surgically treated primary cases (for definition of a primary case see 5.2.1)	152*	46 - 806
Rate	Target ≥ 95%	100%	93.75% - 100%

Basic data indicator:

The definition of the **numerator**, **denominator** and the **target value** are taken from the data sheet.

The **median** for numerator and denominator does not refer to an existing centre but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

Range specifies the value range for the numerator, denominator and ratio of all centres.

The column **Patients Total** displays the total of all patients treated according to the indicator and the corresponding quota.

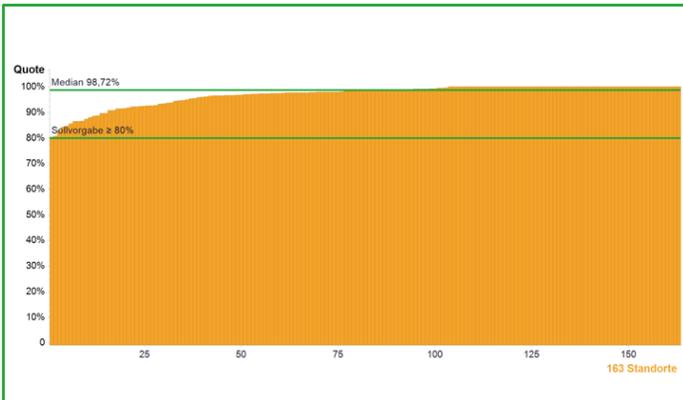
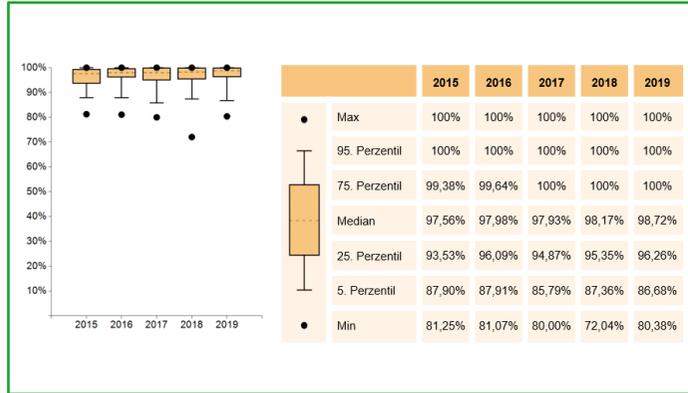


Diagram:

The x-axis indicates the number of centres and the y-axis represents the values in percent or number (e.g. primary cases). The target value is depicted as a green horizontal line. The median, which is also depicted as a green horizontal line, divides the entire group into two equal halves.

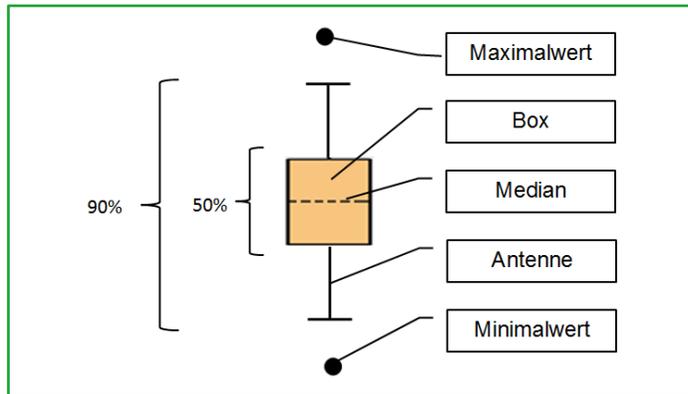
*For further information on the methodological approach see „Development of guideline-based quality indicators“ (https://www.leitlinienprogramm-onkologie.de/fileadmin/user_upload/Downloads/Methodik/QIEP_OL_Version2_english.pdf)

General information



Cohort development:

The **cohort development** in the years **2017, 2018, 2019, 2020** and **2021** is graphically represented with box plots.



Box plot:

A box plot consists of a **box with median, whiskers** and **outliers**. 50 percent of the centres are within the box. The median divides the entire available cohort into two halves with an equal number of centres. The whiskers and the box encompass a 90th percentile area/range. The extreme values are depicted here as dots.

Maximalwert = Maximum value
Antenne = Antenna
Minimalwert = Minimum value

Status of the certification system for Gynaecological Cancer Centres 2022

	31.12.2022	31.12.2021	31.12.2020	31.12.2019	31.12.2018	31.12.2017
Ongoing procedures	10	7	8	12	4	10
Certified Centres	182	182	164	155	143	134
Certified clinical sites	182	183	165	156	145	136
Gynaecology Cancer Centres with 1 clinical site	182	181	163	154	141	132
2 clinical sites	0	1	1	1	2	2
3 clinical sites	0	0	0	0	0	0
4 clinical sites	0	0	0	0	0	0

Clinical sites taken into account

	31.12.2022	31.12.2021	31.12.2020	31.12.2019	31.12.2018	31.12.2017
Clinical sites included in the Annual Report	177	169	162	149	139	128
equivalent to	97,3%	92,3%	98,8%	95,5%	95,9%	94,1%
Primary cases total*	16.272	15.254	14.986	13.762	12.937	12.087
Primary cases per clinical site (mean)*	92	90	92	92	93	94
Primary cases per clinical site (median)*	76	75	78	78	77	76

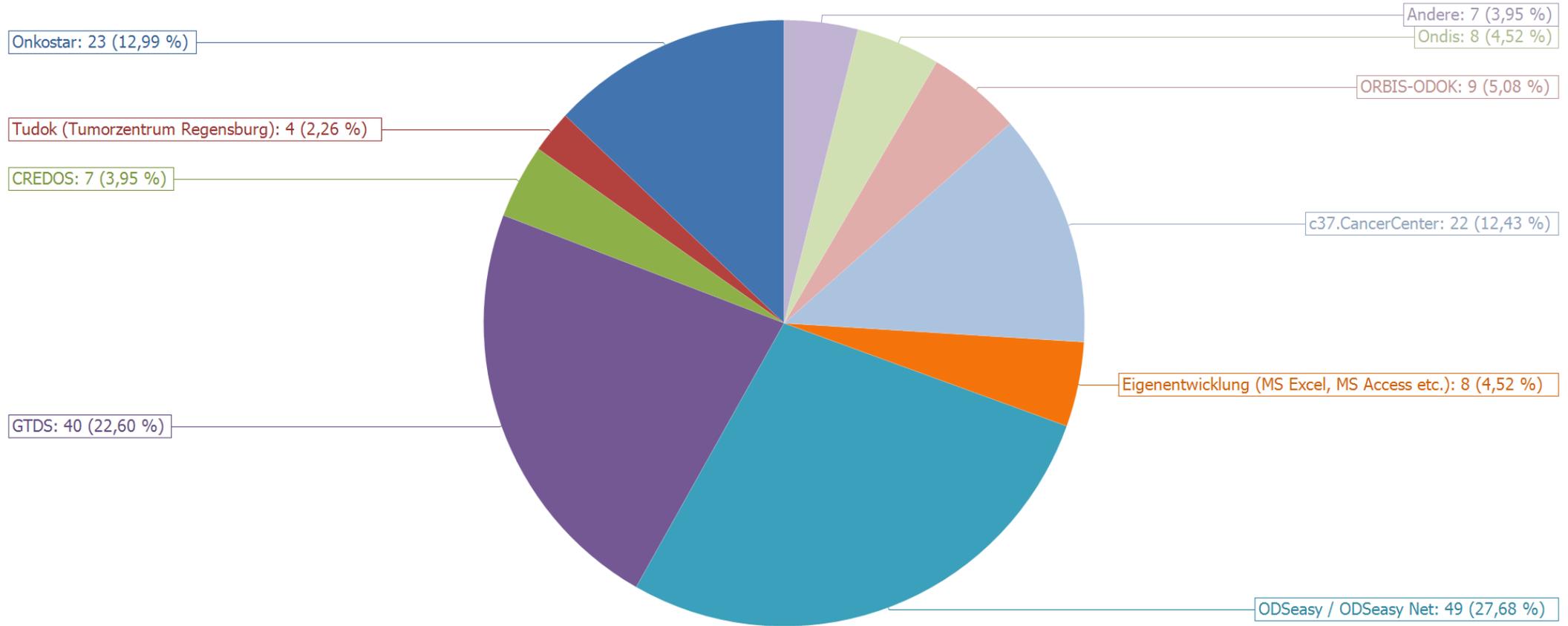
*The figures are based on the clinical sites listed in the Annual Report.

This annual report looks at the gynaecological cancer centres certified in the certification system of the German Cancer Society. The basis for the diagrams in the annual report is the data sheet.

The annual report includes 177 of the 182 certified centre locations. Excluded are 3 clinical sites that were certified for the first time in 2022 (data mapping of complete calendar year not mandatory for the initial certification). Another clinical site did not reach the required number of cases for re-certification and decided not to undergo an audit (suspension of certificate imminent). A total of 16,535 primary cases with genital malignancy were treated at all 181 sites. A current overview of all certified sites is shown on www.oncomap.de.

The indicators published here refer to the indicator year 2021. They represent the assessment basis for the audits carried out in 2022.

Tumour documentation systems in the Centres' clinical sites

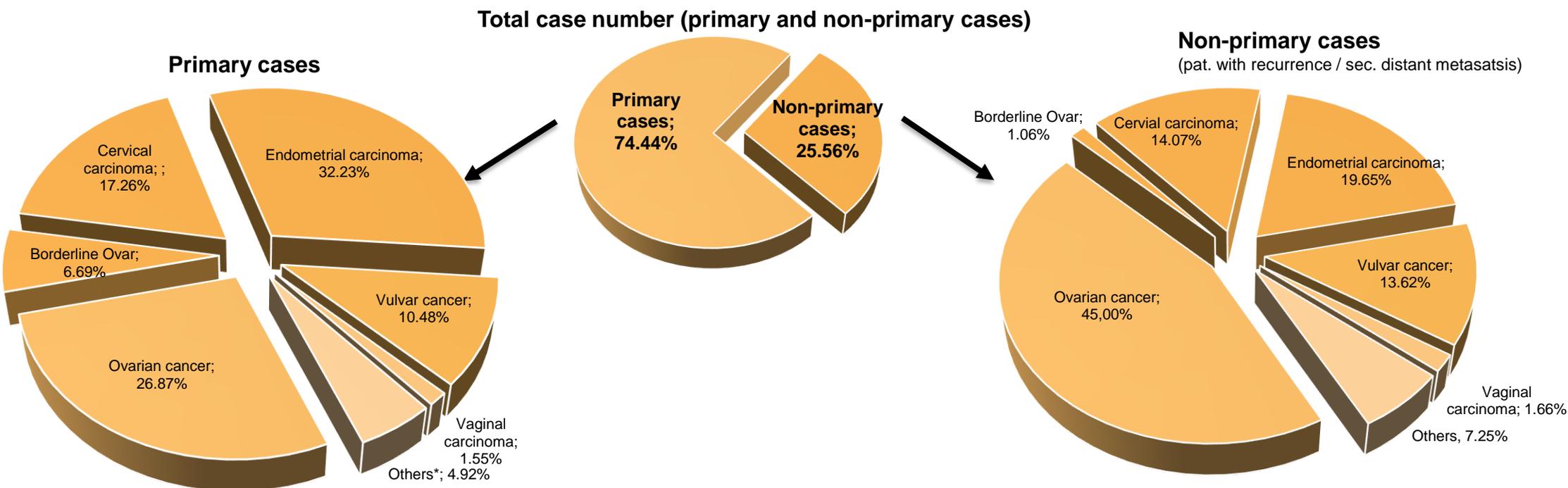


Andere = other
 Tumorzentrum = Tumour centre
 Entwicklung = Development
 Eigenentwicklung = Intrinsic development

Legend:	
Other	System used in ≤ 3 clinical sites

The details on the tumour documentation system was taken from the Data Sheet (Basic Data Sheet). It is not possible to use more than one system. In many cases, support is provided by the cancer registries or there may be a direct link to the cancer registry via a specific tumour documentation system.

Basic data – total case number (primary and non-primary cases)



	Total case number	Primary cases	Non-primary cases
Ovarian cancer	6,758 (30.92%)	4,373 (26.87%)	2,385 (42.69%)
Borderline ovary	1,147 (5.25%)	1,088 (6.69%)	59 (1.06%)
Cervical carcinoma	3,595 (16.45%)	2,809 (17.26%)	786 (14.07%)
Endometrial carcinoma	6,342 (29.01%)	5,244 (32.23%)	1,098 (19.65%)
Vulvar cancer	2,466 (11.28%)	1,705 (10.48%)	761 (13.62%)
Vaginal carcinoma	345 (1.58%)	252 (1.55%)	93 (1.66%)
Others*	1,206 (5.52%)	801 (4.92%)	405 (7.25%)
Total case number	21,859 (100%)	16,272 (100%)	5,587 (100%)

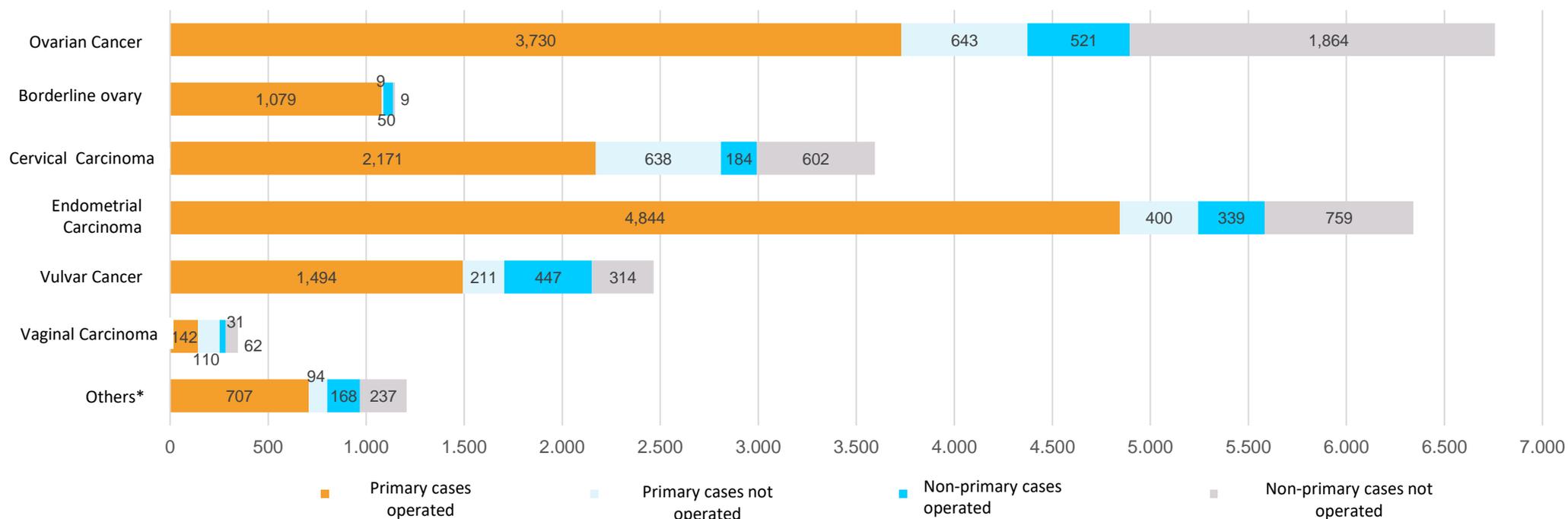
	Incidence ¹ Germany	Primary cases 2021 ²	Share 2021	Primary Cases Germany 2020	Share 2020
Ovarian cancer	7,319	4,453	60.84%	4,097	54.91%
Borderline ovary	-	1,098	-	876	-
Cervical carcinoma	4,575	2,844	62.16%	2,587	59.86%
Endometrial carcinoma	11,266	5,341	47.40%	4,633	42.66%
Vulvar cancer	3,293	1,727	52.44%	1,647	50.34%
Vaginal carcinoma	493	253	51.31%	194	41.02%
Others*	891	819	91.91%	784	85.87%

¹ Centre for cancer register data in the Robert Koch-Institute, incidence 2019.

² including primary cases not yet part of the annual report (Germany only) database query www.krebsdaten.de/abfrage Status of acquisition: 13.09.2022

* Others (for instance sarcomas, chorion carcinomas, etc.)

Basic data – primary and non-primary cases



¹ Pat. with recurrence/ sec. distant metastasis

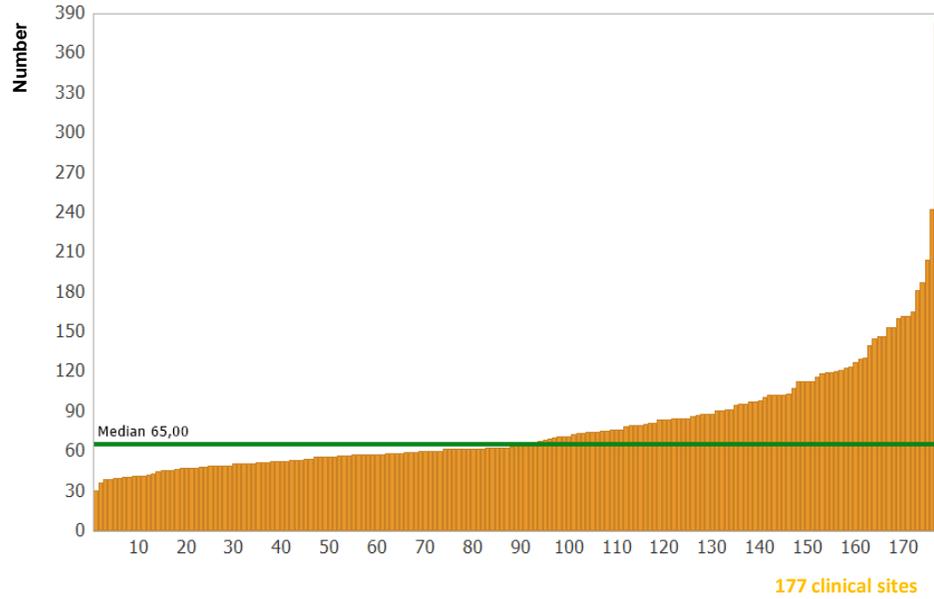
	Primary cases		
	Total	operated	not operated
		absolute (in %)	absolute (in %)
Ovarian cancer	4,373 (100%)	3,730 (85.30%)	643 (14.70%)
Borderline ovary	1,088 (100%)	1,079 (99.17%)	9 (0.83%)
Cervical carcinoma	2,809 (100%)	2,171 (77.29%)	638 (22.71%)
Endometrial carcinoma	5,244 (100%)	4,844 (92.37%)	400 (7.63%)
Vulvar cancer	1,705 (100%)	1,494 (87.62%)	211 (12.38%)
Vaginal carcinoma	252 (100%)	142 (56.35%)	110 (43.65%)
Others*	801 (100%)	707 (88.26%)	94 (11.74%)
Total	16,272	14,167	2,105

	Non-primary cases		
	Total	operated	not operated
		absolute (in %)	absolute (in %)
Ovarian cancer	2,385 (100%)	521 (21.84%)	1,864 (78.16%)
Borderline ovary	59 (100%)	50 (84.75%)	9 (15.25%)
Cervical carcinoma	786 (100%)	184 (23.41%)	602 (76.59%)
Endometrial carcinoma	1,098 (100%)	339 (30.87%)	759 (69.13%)
Vulvar cancer	761 (100%)	447 (58.74%)	314 (41.26%)
Vaginal carcinoma	93 (100%)	31 (33.33%)	62 (66.67%)
Others*	405 (100%)	168 (41.48%)	237 (58.52%)
Total	5,587	1,740	3,847

* Others (for instance sarcomas, chorion carcinomas, etc.)

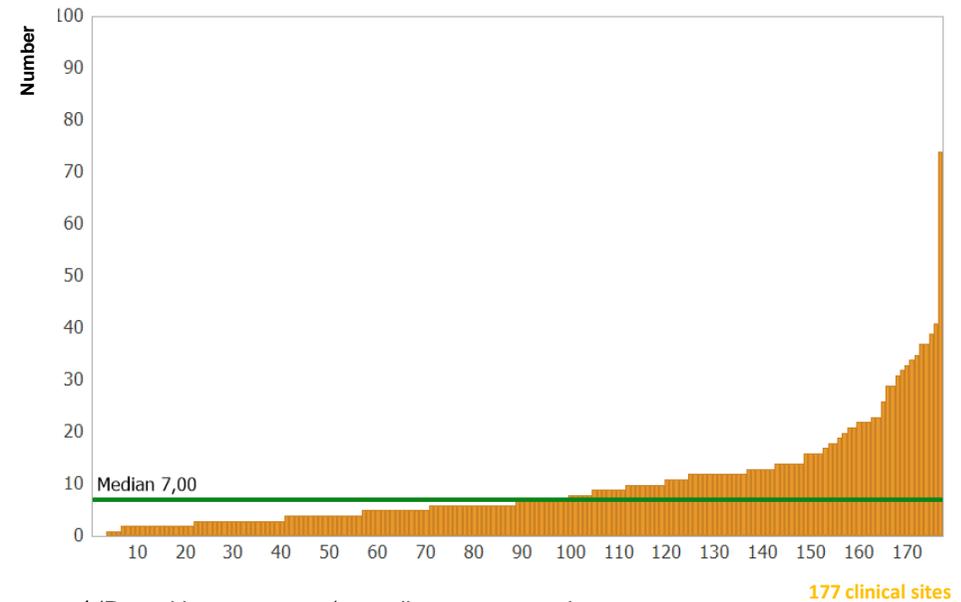
Surgical cases with a genital malignoma

Surgical primary cases



	2017	2018	2019	2020	2021
Max	342,00	328,00	371,00	395,00	383,00
95 th percentile	149,00	171,60	151,95	155,20	155,40
75 th percentile	97,00	93,00	92,00	92,00	92,00
Median	71,00	70,00	67,00	66,00	65,00
25 th percentile	57,00	56,00	54,25	54,00	55,00
5 th percentile	44,00	41,40	40,00	40,00	42,00
Min	36,00	30,00	33,00	29,00	31,00

Surgical non-primary cases (pat. with recurrence / sec. distant metastasis)

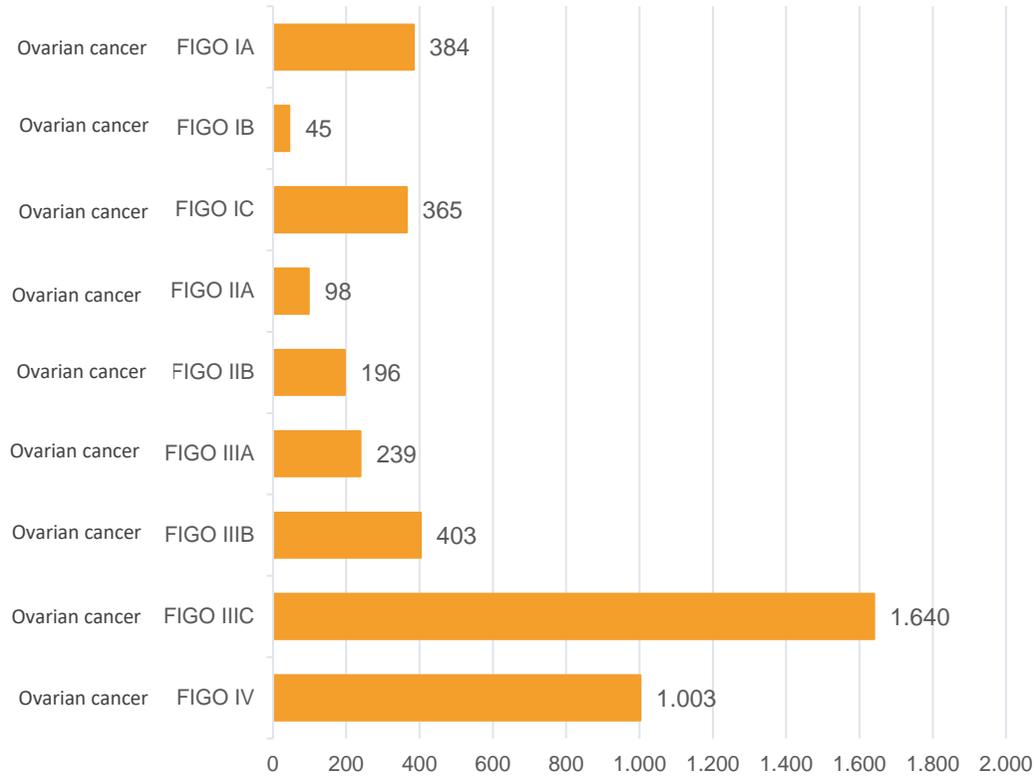


¹ (Pat. with recurrence/ sec. distant metastasis)

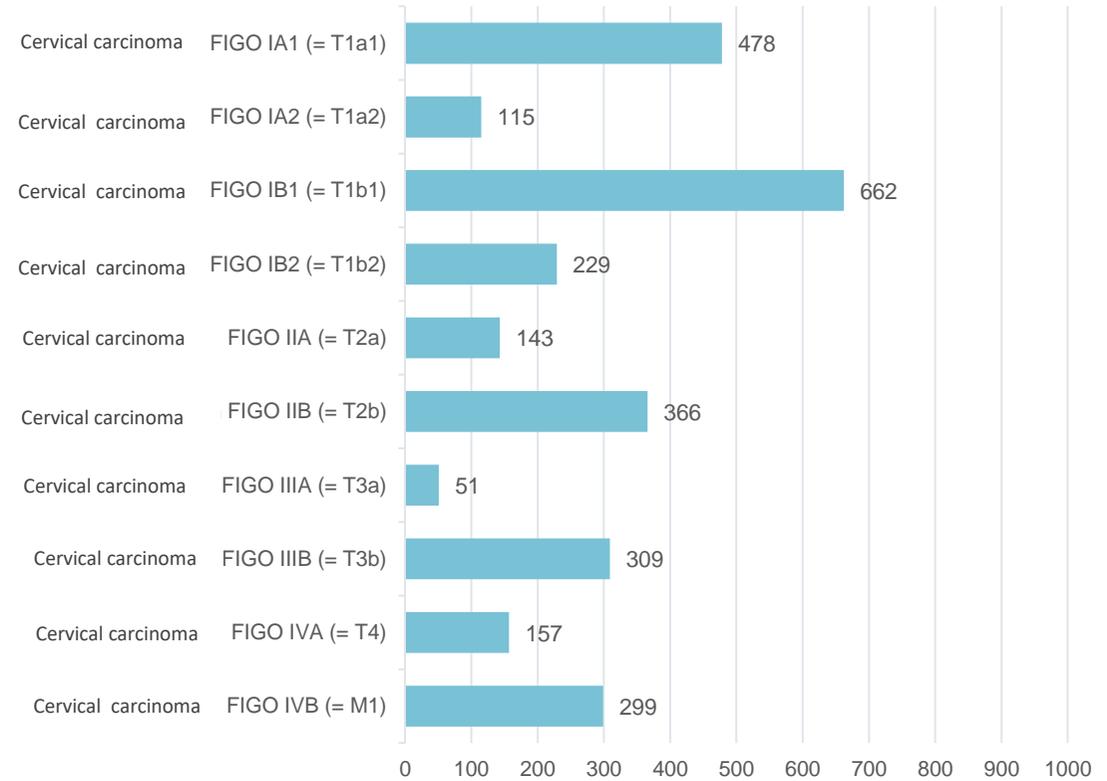
	2017	2018	2019	2020	2021
Max	92,00	89,00	92,00	76,00	74,00
95 th percentile	30,20	32,60	28,95	32,60	31,20
75 th percentile	13,00	13,00	12,00	12,00	12,00
Median	9,00	8,00	8,00	8,00	7,00
25 th percentile	5,00	5,00	5,00	5,00	4,00
5 th percentile	2,00	2,00	2,00	2,00	2,00
Min	0,00	1,00	0,00	0,00	0,00

Basic data - Primary cases ovarian and cervical

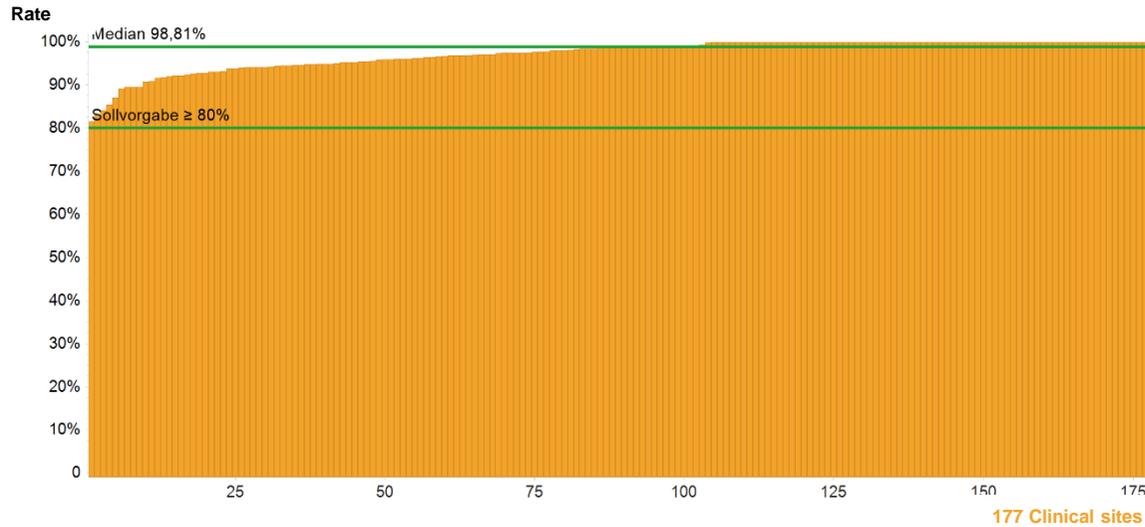
Ovarian cancer: Primary cases operated + not operated



Cervical carcinoma: Primary cases operated + not operated

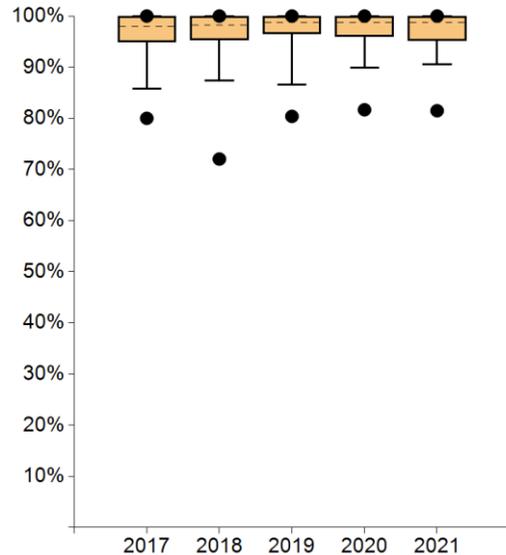


1. Presentation tumour board



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Pat. of the denominator presented at the tumour board	98*	60 - 699	21260
Denominator	Total case number (= indicator 5)	99*	64 - 700	21859
Rate	Target value ≥ 80%	98.81%	81.48% - 100%	97.26%**

Sollvorgabe = target value



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	97.93%	98.17%	98.73%	98.80%	98.81%
25 th percentile	94.87%	95.35%	96.44%	96.00%	95.24%
5 th percentile	85.79%	87.36%	86.64%	89.89%	90.55%
● Min	80.00%	72.04%	80.38%	81.67%	81.48%

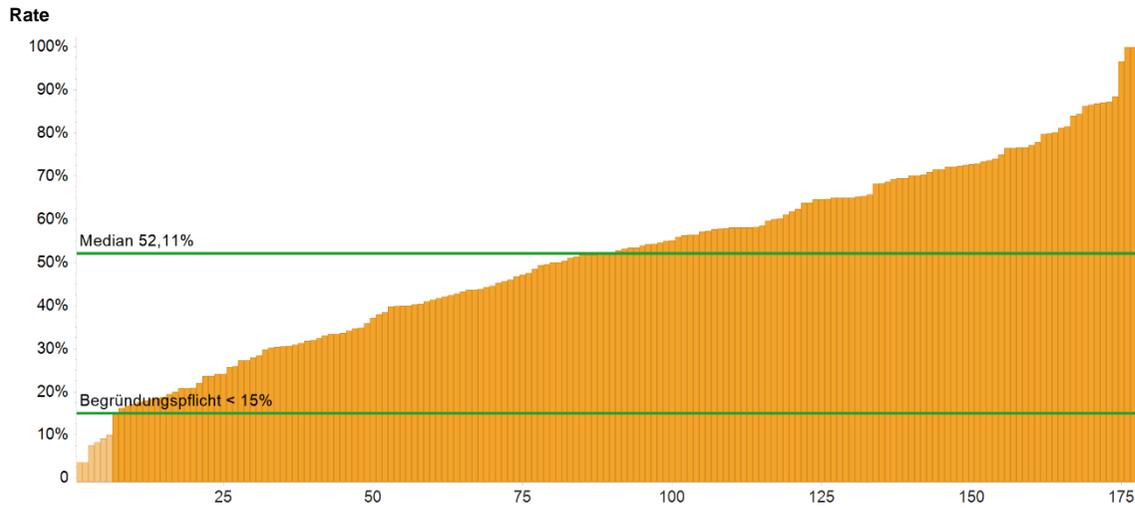
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	177	100.00%

Comments:

All centres meet the target value of 80%, as in previous years. 21,260 of the 21,859 eligible patients with initial diagnosis, recurrence or new metastasis are presented at the tumour board.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

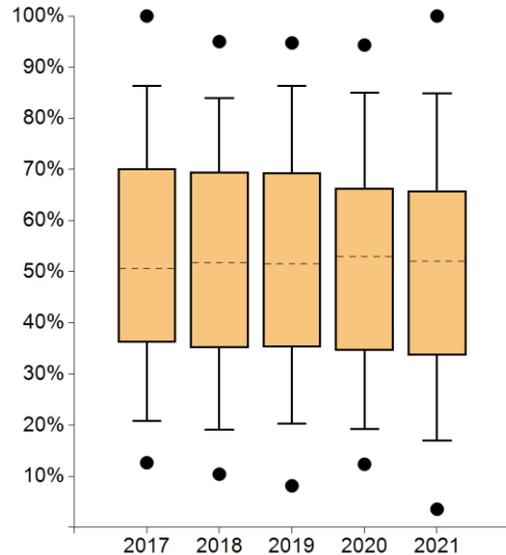
2. Psycho-oncological counselling (session ≥ 25 min)



Begründungspflicht = mandatory statement of reasons

177 Clinical sites

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Patients of the denominator, who received psycho-oncological counselling in an outpatient or inpatient setting (consultation ≥ 25 min.)	57*	3 - 374	10962
Denominator	Total case number (= indicator 5)	99*	64 - 700	21859
Rate	Mandatory statement of reasons*** < 15%	52.11%	3.57% - 100%	50.15%**



	2017	2018	2019	2020	2021
● Max	100%	95.00%	94.74%	94.32%	100%
95 th percentile	86.35%	83.98%	86.35%	84.98%	84.82%
75 th percentile	70.18%	69.51%	69.36%	66.32%	65.79%
Median	50.63%	51.81%	51.49%	52.94%	52.11%
25 th percentile	36.16%	35.05%	35.29%	34.58%	33.64%
5 th percentile	20.77%	19.05%	20.27%	19.20%	17.04%
● Min	12.66%	10.42%	8.15%	12.36%	3.57%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
177	100.00%	171	96.61%

Comments:

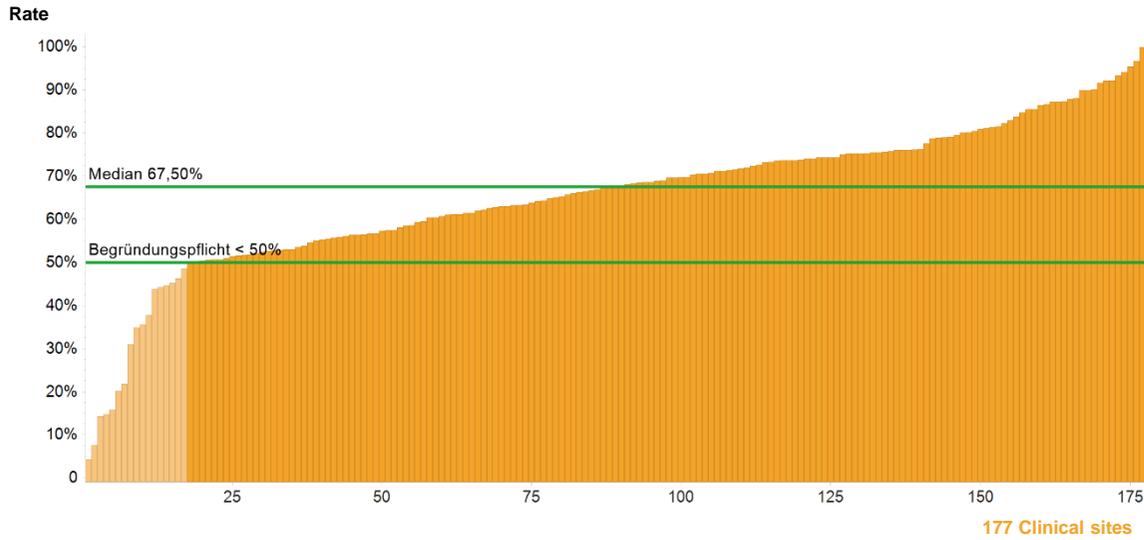
The median rate of psycho-oncological counselling has remained unchanged over the years. 6 centres are required to state reasons because they provide psycho-oncological counselling to less than 15% of patients. The centres explain the low rates with a lack of need in the case of inconspicuous screening, a lack of take-up in the case of personal offers and a transitional lack of staffing despite an intensive search for personnel.

*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

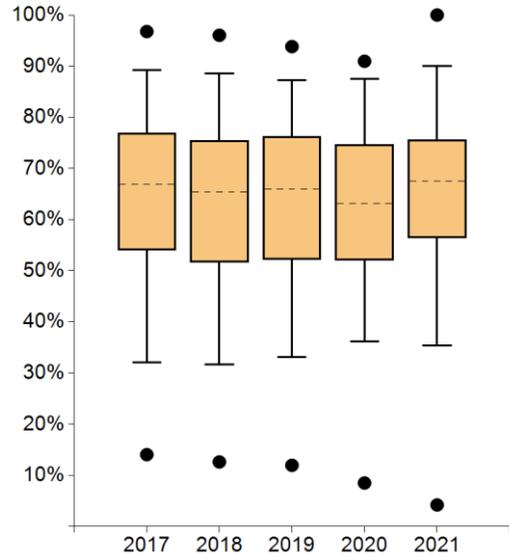
*** If value is outside the plausibility corridor, centres have to give an explanation.

3. Social service counselling



Begründungspflicht = mandatory statement of reasons

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Patients of the denominator, who received counselling from the social services in an outpatient or inpatient setting	67*	4 - 474	14258
Denominator	Total case number (= indicator 5)	99*	64 - 700	21859
Rate	Mandatory statement of reasons*** < 50%	67.50%	4.21% - 100%	65.23%**



	2017	2018	2019	2020	2021
● Max	96.77%	96.04%	93.83%	90.96%	100%
95 th percentile	89.23%	88.51%	87.22%	87.46%	90.02%
75 th percentile	76.92%	75.53%	76.22%	74.70%	75.58%
Median	66.83%	65.43%	65.91%	63.16%	67.50%
25 th percentile	54.06%	51.61%	52.21%	52.09%	56.38%
5 th percentile	32.00%	31.69%	33.13%	36.20%	35.43%
● Min	14.05%	12.62%	11.96%	8.50%	4.21%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
177	100.00%	160	90.40%

Comments:

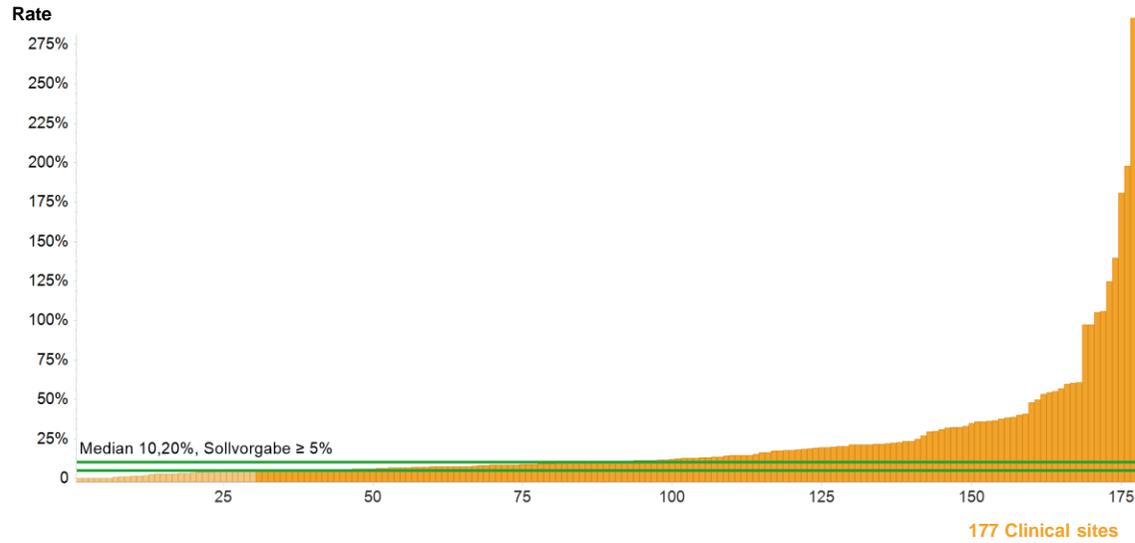
Of the 17 centres with quotas <50% (= limit of the obligation to give reasons), 9 are in Switzerland and Austria. There, social work counselling is carried out and financed by nursing staff or via external institutions. The remaining 8 centers are located in Germany and have ratio between 30% and <50%. They justify the care rate with documentation difficulties, staff shortages, inpatient stays that are too short. In the latter cases, written information or telephone counselling is offered.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

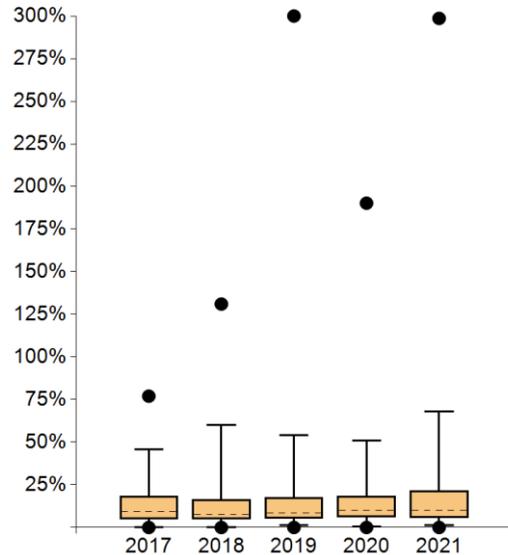
*** If value is outside the plausibility corridor, centres have to give an explanation.

4. Patients enrolled in a study



Sollvorgabe = target value

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Patients included in a study with an ethical vote	8*	0 - 440	4500
Denominator	Primary cases (= indicator 6)	76*	44 - 406	16272
Rate	Target value ≥ 5%	10.20%	0.00% - 298.61%	27.65%**



	2017	2018	2019	2020	2021
● Max	77.03%	131.05%	300.00%	190.22%	298.61%
95 th percentile	45.66%	59.97%	54.16%	51.00%	68.09%
75 th percentile	18.32%	16.44%	17.54%	18.39%	21.57%
Median	9.21%	7.69%	8.60%	10.26%	10.20%
25 th percentile	5.04%	5.00%	5.29%	6.25%	5.88%
5 th percentile	0.00%	0.00%	1.39%	0.49%	1.45%
● Min	0.00%	0.00%	0.00%	0.00%	0.00%

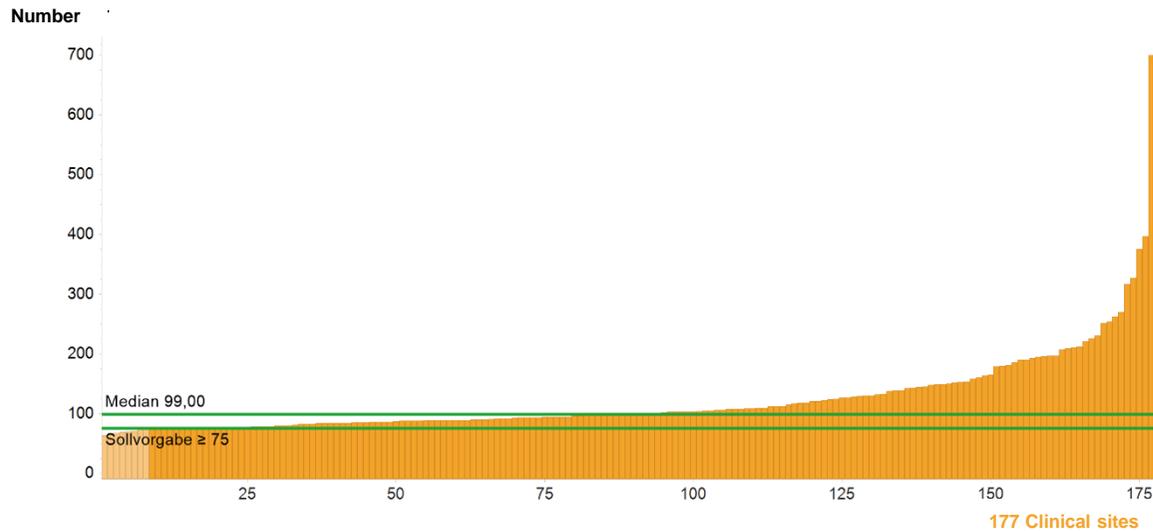
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	147	83.05%

Comments:

The median study rate is slightly increasing over time. A total of 4,500 patients were included in studies. 3 centres were unable to include any study patients. Of these, 1 centre was able to prove in the audit that they had screened the patients, but that the inclusion criteria then prevented inclusion. 1 centre with repeatedly missing study inclusion received a deviation that could be rectified. And in 1 centre, good study activity could be demonstrated in the current year.

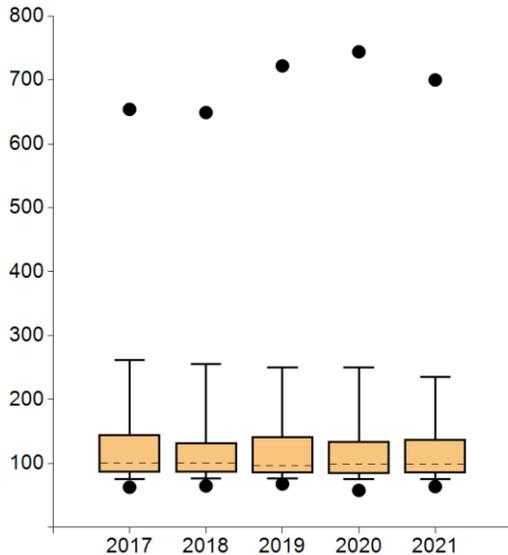
*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

5. Total case number



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Number	Total cases	99	64 - 700	21859
	Target value ≥ 75			

Sollvorgabe = target value



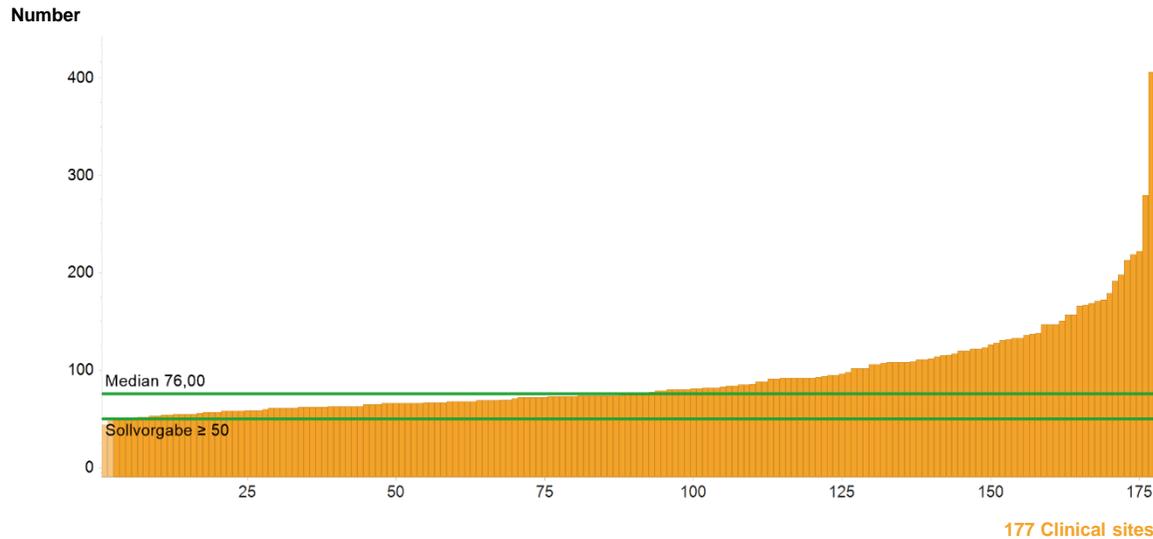
	2017	2018	2019	2020	2021
● Max	654,00	649,00	722,00	744,00	700,00
95 th percentile	262,00	255,80	250,70	250,00	235,00
75 th percentile	145,50	133,00	141,75	135,00	138,00
Median	101,00	101,00	97,00	99,00	99,00
25 th percentile	86,00	86,00	85,00	84,00	85,00
5 th percentile	75,90	76,40	77,05	75,00	75,00
● Min	63,00	65,00	68,00	58,00	64,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	169	95.48%

Comments:

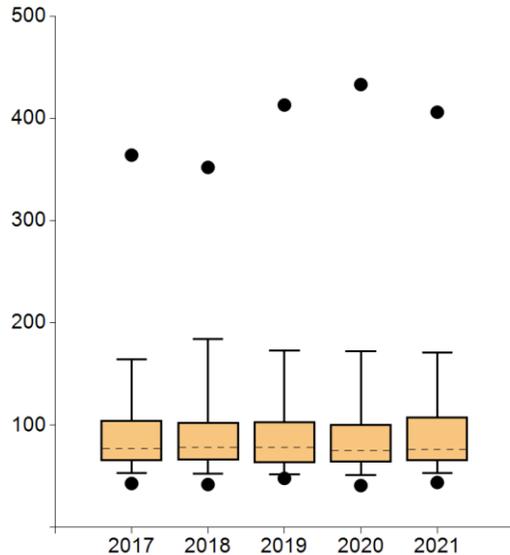
A total of 22,205 primary and non-primary cases were treated in the centres in 2021, of which 21,859 are included in the annual report. 8 centres do not meet the target value and explain this primarily with a Covid-related decline in the number of cases. In comparison with the pre-Covid year 2019, the total number of cases in the centres certified since at least 2019 decreased by 440.

6a. Primary cases



Number	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
	Primary cases	76	44 - 406	16272
	Target value ≥ 50			

Sollvorgabe = target value



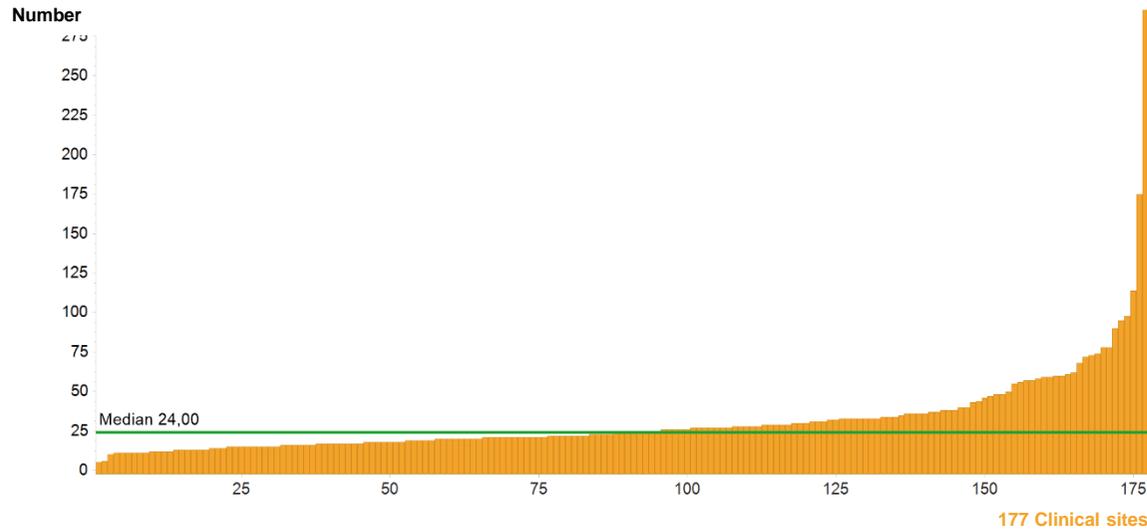
	2017	2018	2019	2020	2021
● Max	364,00	352,00	413,00	433,00	406,00
95 th percentile	164,20	184,20	172,95	172,20	171,20
75 th percentile	105,00	103,00	103,50	101,00	108,00
Median	77,00	78,00	78,00	75,00	76,00
25 th percentile	65,00	66,00	63,00	64,00	65,00
5 th percentile	52,90	52,80	52,00	51,00	53,00
● Min	43,00	42,00	48,00	41,00	44,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	175	98.87%

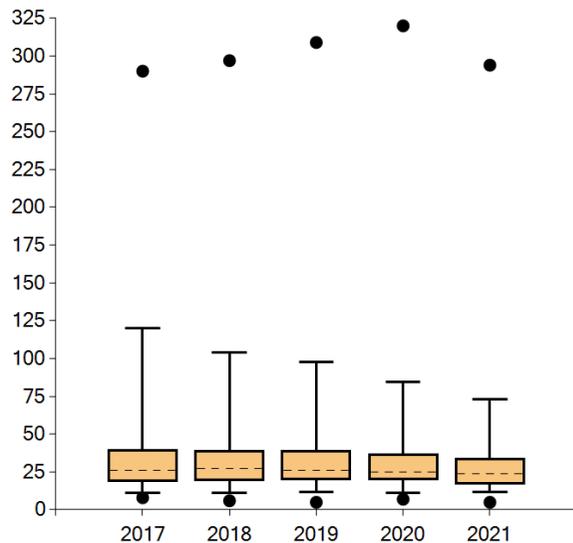
Comments:

2 centres do not meet the target value and justify this with a Covid-related decline in the number of cases. Both centres also do not meet the target value for the total number of cases. In the treatment year 2021, the Covid regulation could still be applied. Interestingly, the number of primary cases in treatment year 2021 increased by 314 cases compared to pre-Covid year 2019 (only centres that have been certified since at least treatment year 2019).

6. Non primary cases



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Number	Non primary cases	24	5 - 294	5587
	No target value			



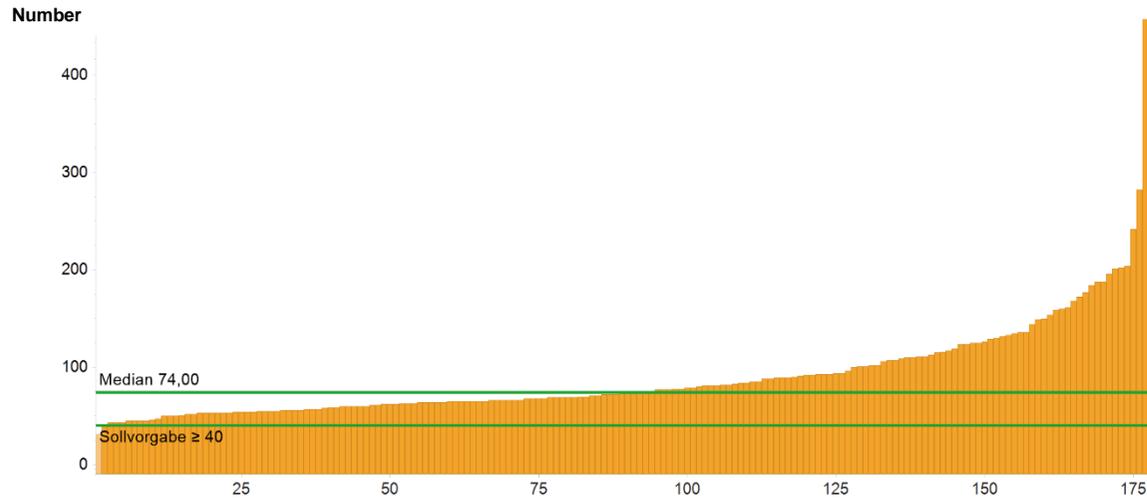
	2017	2018	2019	2020	2021
● Max	290,00	297,00	309,00	320,00	294,00
95 th percentile	119,90	104,20	97,90	84,60	73,20
75 th percentile	40,00	39,00	39,00	37,00	34,00
Median	26,00	27,00	26,00	25,00	24,00
25 th percentile	18,50	19,00	20,00	20,00	17,00
5 th percentile	11,00	11,00	12,00	11,00	11,80
● Min	8,00	6,00	5,00	7,00	5,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	-----	-----

Comments:

In the treatment year 2021, 5,587 non-primary cases were treated in the Gynaecological Cancer Centres. A median of 24 non-primary cases per centre. In centres that have been certified since at least the treatment year 2021, the number of non-primary cases has thus decreased by 126 cases.

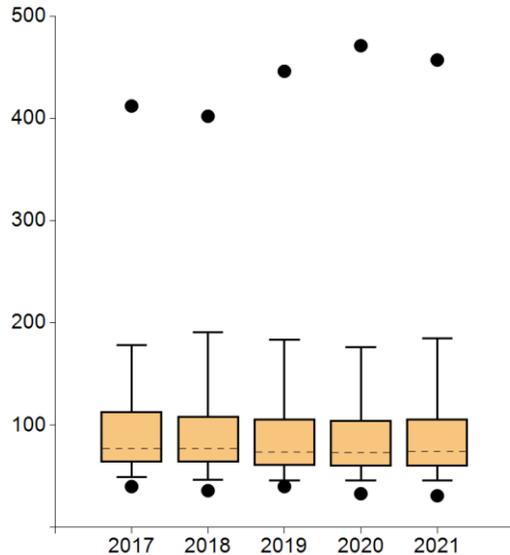
7. Surgical cases



177 Clinical sites

Sollvorgabe = target value

Number	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
	Surgical cases	74	31 - 457	15907
	Target value ≥ 40			



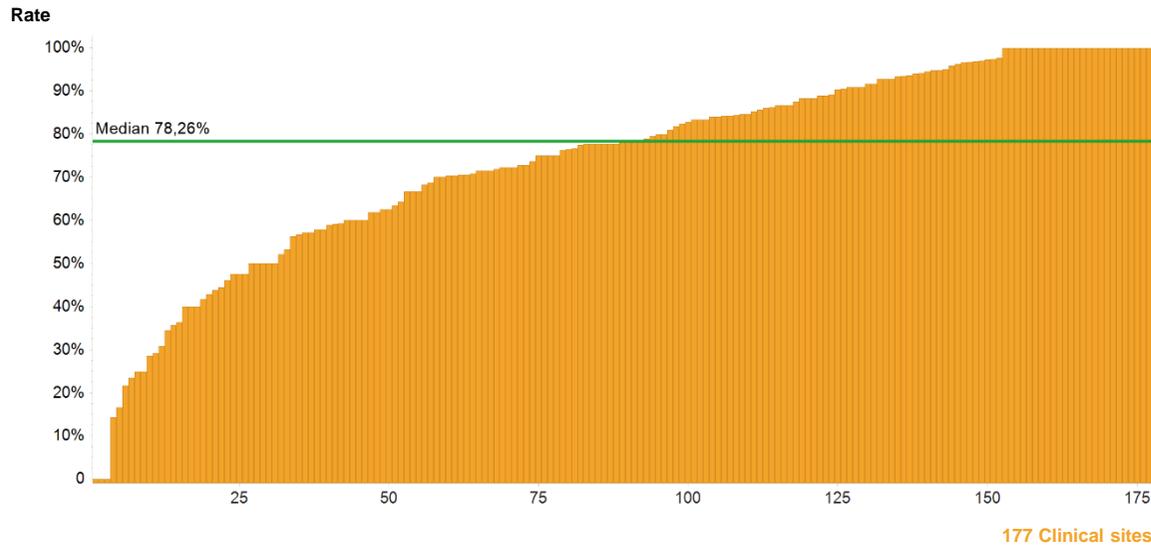
	2017	2018	2019	2020	2021
● Max	412,00	402,00	446,00	471,00	457,00
95 th percentile	178,10	190,80	183,55	176,00	184,80
75 th percentile	113,50	109,00	106,00	105,00	106,00
Median	77,00	77,00	73,50	73,00	74,00
25 th percentile	64,00	64,00	60,25	60,00	60,00
5 th percentile	48,90	46,40	46,05	46,00	45,80
● Min	40,00	36,00	40,00	33,00	31,00

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	176	99.44%

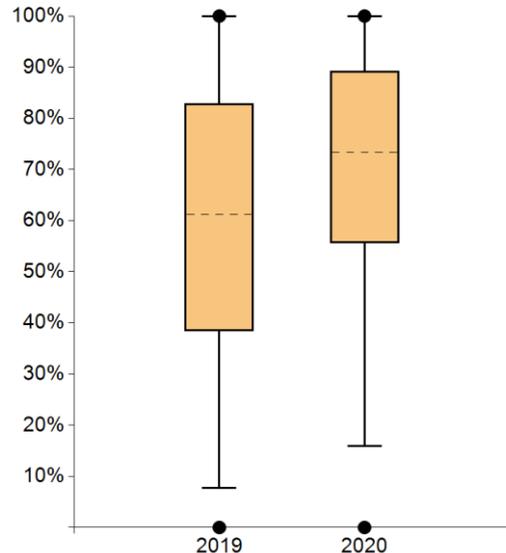
Comments:

1 centre did not reach the target value of at least 40 operative cases (31 operative cases). The centre was undergoing a surveillance audit and justified the shortfall with a Covid-related decline. In the centres that have been certified since at least the 2019 treatment year, i.e. since at least the pre-Covid year, the number of surgical cases has decreased by 77; in 2020, there was a decrease of 204 surgical cases.

8. Offering of genetic testing (GL ovary QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with offer genetic testing	14*	0 - 155	3343
Denominator	Primary cases ovarian cancer	20*	5 - 219	4373
Rate	No target value	78.26%	0.00% - 100%	76.45%**



	2016	2017	2018	2019	2020
● Max	----	----	----	100%	100%
95 th percentile	----	----	----	100%	100%
75 th percentile	----	----	----	82,86%	89,19%
Median	----	----	----	61,11%	73,33%
25 th percentile	----	----	----	38,46%	55,56%
5 th percentile	----	----	----	7,69%	15,90%
● Min	----	----	----	0,00%	0,00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	----	----

Comments:

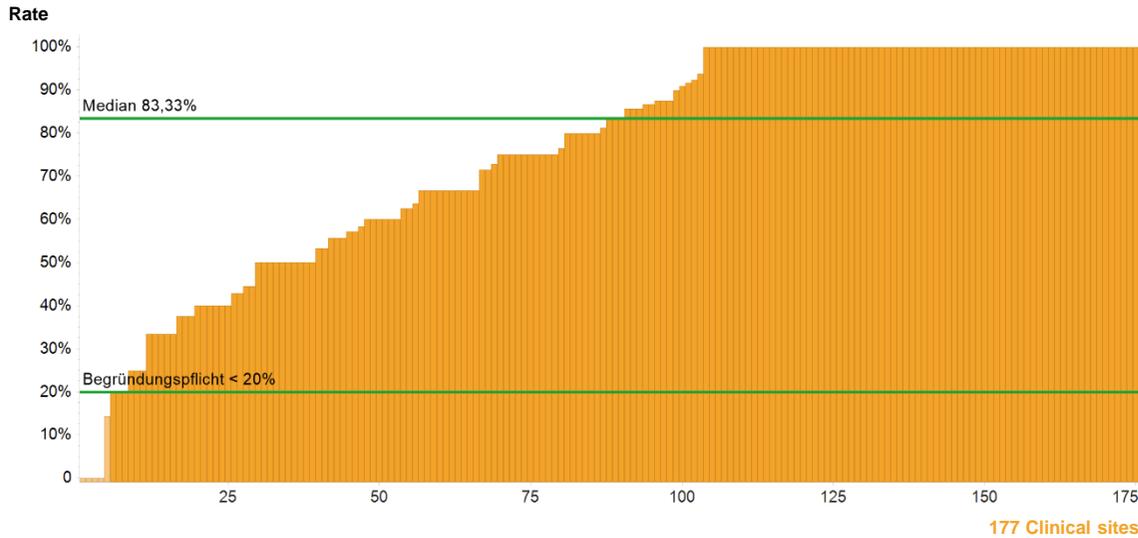
The degree of fulfilment of the QI for recording the offer of genetic testing for patients with an initial diagnosis of ovarian cancer has been showing a positive development across the entire range for years. In 25 centres, all primary cases with ovarian cancer were offered such an option. (Only) 3 centres had a rate of 0% and justified this, among other things, with structures that are being set up.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

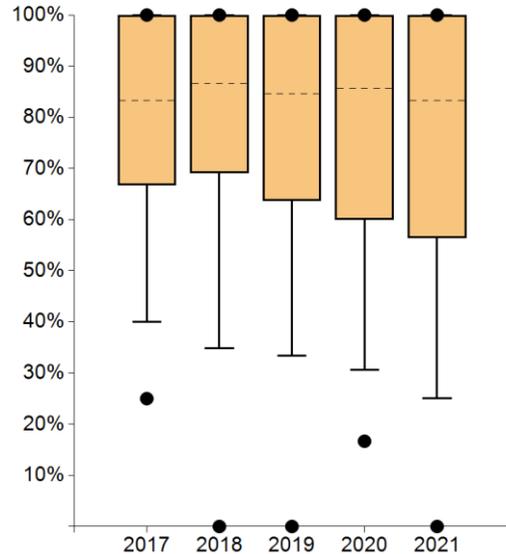
*** If value is outside the plausibility corridor, centres have to give an explanation.

9. Surgical staging early ovarian cancer (GL ovary QI)



Begründungspflicht = mandatory statement of reasons

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with operative staging (def. see indicator sheet)	4*	0 - 49	976
Denominator	Surgical primary cases with an ovarian cancer FIGO I-IIIa	6*	1 - 49	1266
Rate	Mandatory statement of reasons*** < 20%	83.33%	0.00% - 100%	77.09%**



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	83.33%	86.61%	84.62%	85.71%	83.33%
25 th percentile	66.67%	69.17%	63.64%	60.00%	56.35%
5 th percentile	40.00%	34.79%	33.33%	30.59%	25.00%
● Min	25.00%	0.00%	0.00%	16.67%	0.00%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
175	98.87%	170	97.14%

Comments:

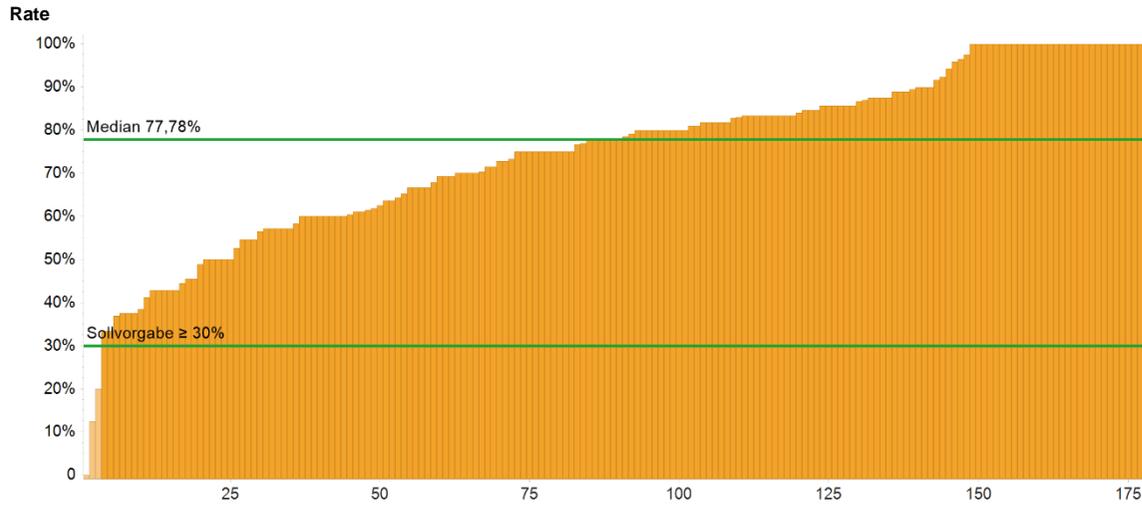
The median for the QI surgical staging in primary surgical cases with ovarian cancer FIGO I-IIIa is slightly declining. 4 centres did not perform surgical staging for any patient; these centres had up to a maximum of 4 patients in the denominator. The reasons given by the centres were patient refusal, age and comorbidity. 1 centre did not perform laparotomy in 3 patients with stage pT1a. This was critically discussed in the audit.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

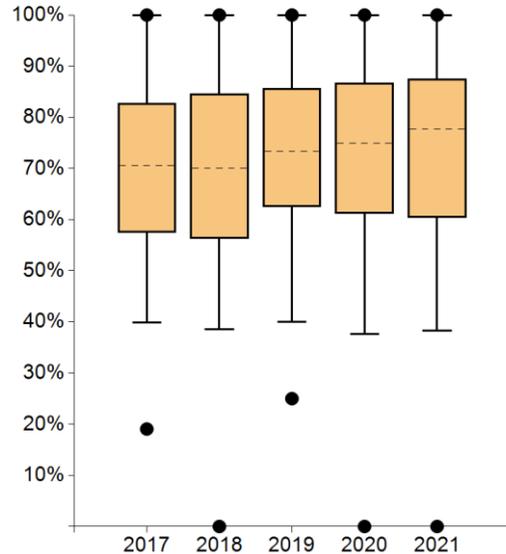
10. Macroscopic complete resection of advanced ovarian cancer (GL ovary QI)



Sollvorgabe = target value

177 Clinical sites

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with macroscopically complete resection	7*	0 - 119	1718
Denominator	Surgical primary cases ovarian cancer FIGO IIB-IV	10*	1 - 170	2345
Rate	Target value $\geq 30\%$	77.78%	0.00% - 100%	73.26%**



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	82.74%	84.62%	85.71%	86.67%	87.50%
Median	70.59%	70.00%	73.33%	75.00%	77.78%
25 th percentile	57.52%	56.25%	62.50%	61.16%	60.42%
5 th percentile	39.87%	38.50%	40.00%	37.63%	38.27%
● Min	19.05%	0.00%	25.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	174	98.31%

Comments:

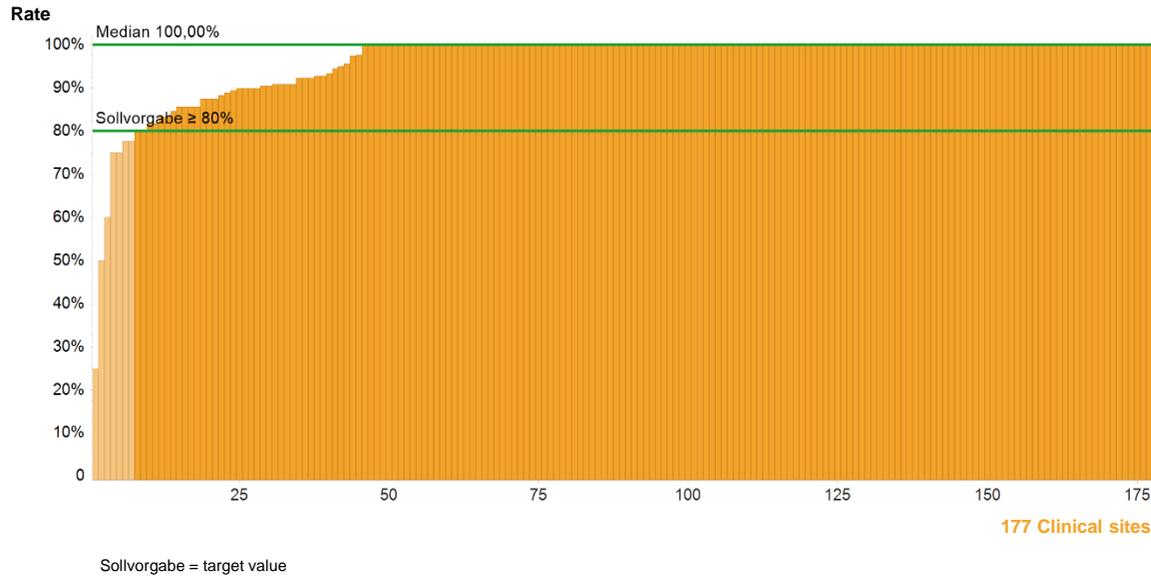
The median number of macroscopically complete operations in primary surgical cases FIGO IIB-IV is slightly increasing over time. The 3 centres that did not reach the target value of 30% gave advanced carcinomas as reason. All 3 centres were above the target value in the previous year.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

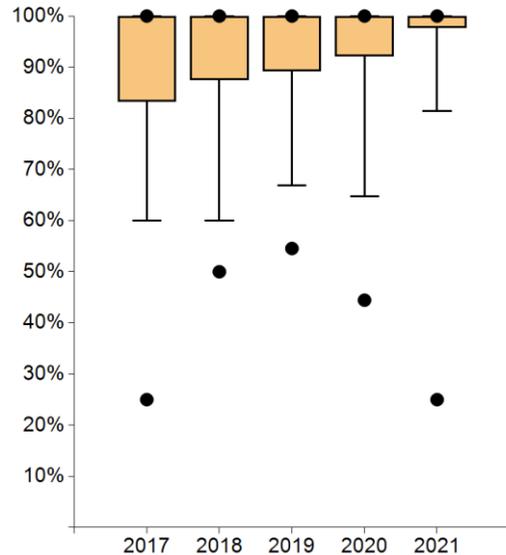
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

11. Operation advanced ovarian cancer by a gynaecological oncologist (GL ovary QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator whose definitive surgical treatment was performed by a gynecological oncologist	10*	1 - 170	2272
Denominator	Surgical primary cases ovarian cancer FIGO IIB-IV after completion of surgical treatment	10*	1 - 170	2345
Rate	Target value ≥ 80%	100%	25.00% - 100%	96.89%**



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 th percentile	83.33%	87.50%	89.17%	92.15%	97.67%
5 th percentile	59.93%	60.00%	66.82%	64.70%	81.46%
● Min	25.00%	50.00%	54.55%	44.44%	25.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	170	96.05%

Comments:

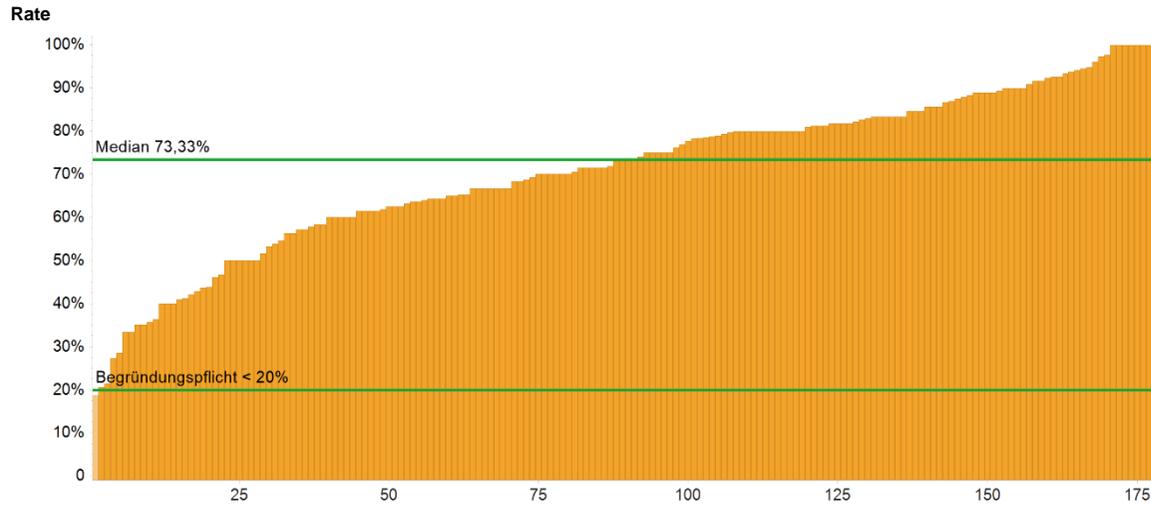
The QI of the guideline is implemented very well. And especially in the lower percentiles there is a constant increase in results. 7 centres narrowly missed the target. Reasons given were Covid-related postponed specialty exams by the medical associations and illness of specialist (gynecological oncologist). Remarks and deviations were formulated by the auditors.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

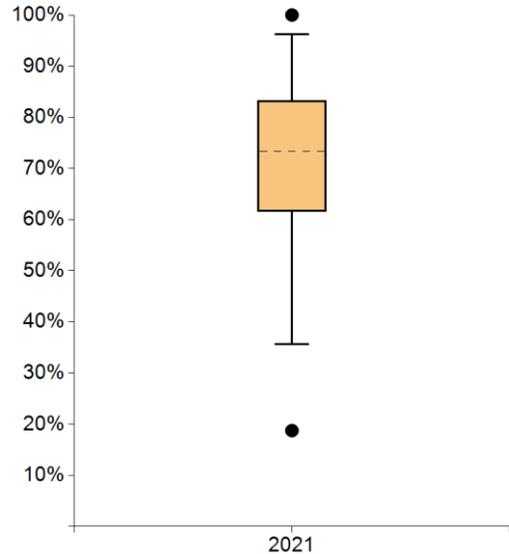
13. First-line chemotherapy of advanced ovarian cancer (GL ovary QI)



Begründungspflicht = mandatory statement of reasons

177 Clinical sites

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with first-line chemotherapy with carboplatin and paclitaxel	12*	1 - 180	2562
Denominator	Primary cases ovarian cancer FIGO IIB-IV	16*	3 - 192	3579
Rate	Mandatory statement of reasons*** < 20%	73.33%	18.75% - 100%	71.58%**



	2017	2018	2019	2020	2021
● Max	----	----	----	----	100%
95 th percentile	----	----	----	----	96,24%
75 th percentile	----	----	----	----	83,33%
Median	----	----	----	----	73,33%
25 th percentile	----	----	----	----	61,54%
5 th percentile	----	----	----	----	35,60%
● Min	----	----	----	----	18,75%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
177	100,00%	176	99,44%

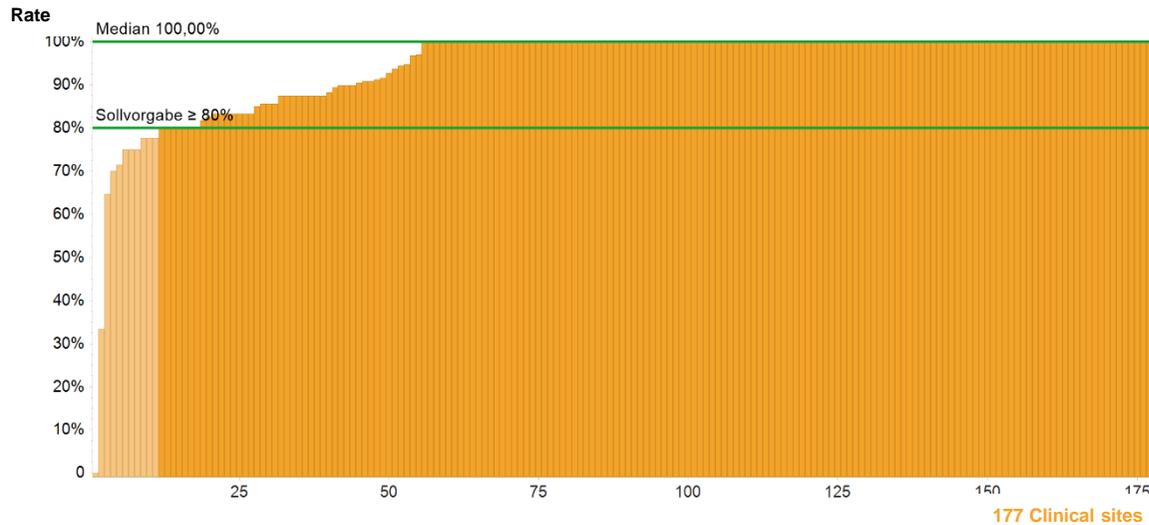
Comments:
 The QI has been in the guideline for a long time, but was adjusted in the last update (change in stage and omission of chemotherapy dosage). In total, 2,562 of the eligible patients received first-line chemotherapy with carboplatin and paclitaxel. 1 centre has a ratio <20% (limit of obligation to give reason); this centres states, that it has carried out treatment with carboplatin (as monotherapy or in combination with Caelyx), in elder and/or multimorbide patients.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

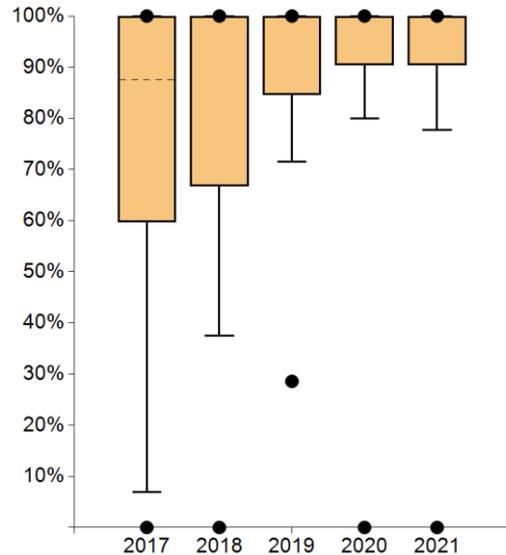
*** If value is outside the plausibility corridor, centres have to give an explanation.

14. Details in the pathology report in the case of first diagnosis and tumour resection (GL cervix QI) Certification



Sollvorgabe = target value

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with complete information in the pathology reports (def. see indicator sheet)	7*	0 - 37	1533
Denominator	Surgical primary cases cervical cancer and tumour resection	7*	1 - 37	1635
Rate	Target value ≥ 80%	100%	0.00% - 100%	93.76%**



	2017	2021	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%	100%
Median	87.50%	100%	100%	100%	100%	100%
25 th percentile	59.73%	66.67%	84.62%	90.36%	90.48%	90.48%
5 th percentile	6.98%	37.50%	71.43%	80.00%	77.78%	77.78%
● Min	100%	100%	100%	100%	100%	100%

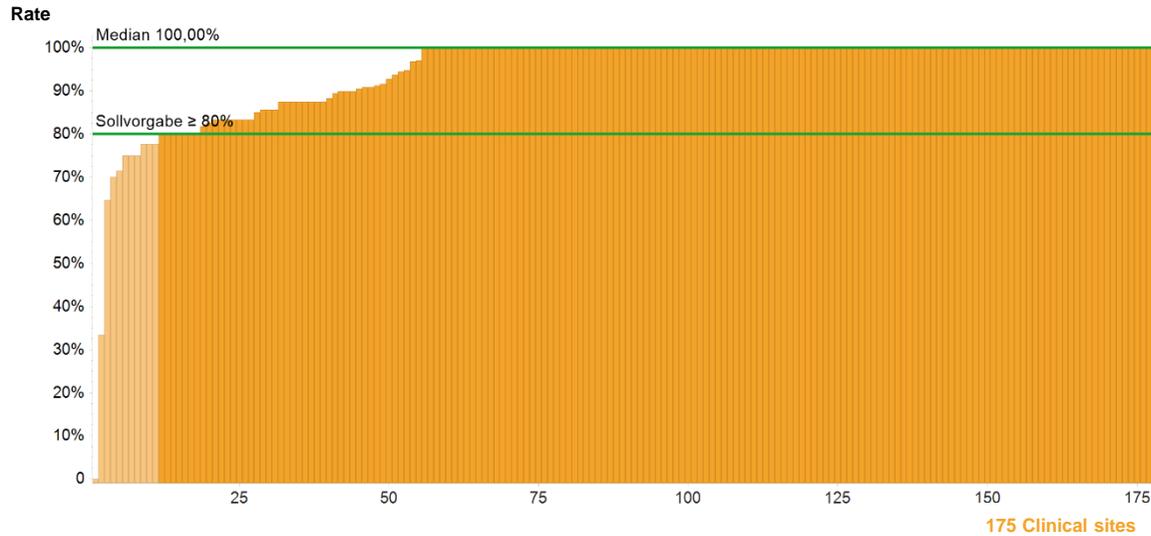
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	166	93.79%

Comments:

The QI of the guideline develops very well over time. And here, too, the development of the lower percentiles is very interesting. Obviously, the definition of the contents of the pathology reports is a process that has to be agreed once within a centre and is then automatically applied to all patients. 11 centres narrowly failed to meet the requirements. Only 1 centre had a rate of 0% with only 1 patient in the denominator. Reasons for incomplete reports are mainly invasive Ca in external histology with missing cancer detection in the resectate as well as no indication of the 3-dimensional tumour size.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

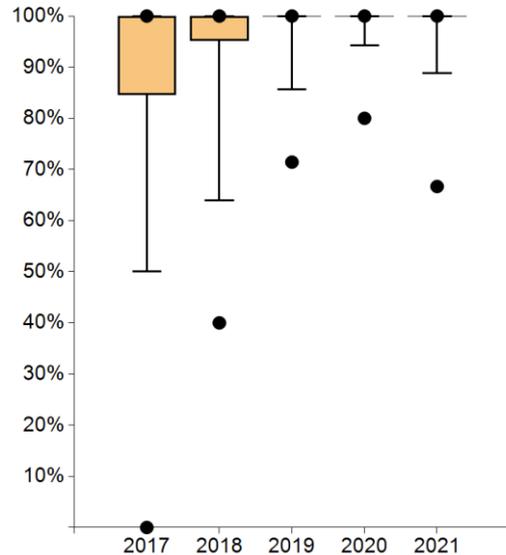
15. Details in the pathology report in the case of lymphonodectomy (GL cervix QI)



Sollvorgabe = target value

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Surgical primary cases of the denominator with complete pathology reports (def. see indicator sheet)	5*	1 - 38	1231
Denominator	Surgical cases cervical cancer and lymphonodectomy	5*	1 - 38	1249
Rate	Target value ≥ 80%	100%	66.67% - 100%	98.56%**

*



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95. Perzentil	100%	100%	100%	100%	100%
75. Perzentil	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25. Perzentil	84.62%	95.21%	100%	100%	100%
5. Perzentil	50.00%	63.96%	85.71%	94.20%	88.89%
● Min	0.00%	40.00%	71.43%	80.00%	66.67%

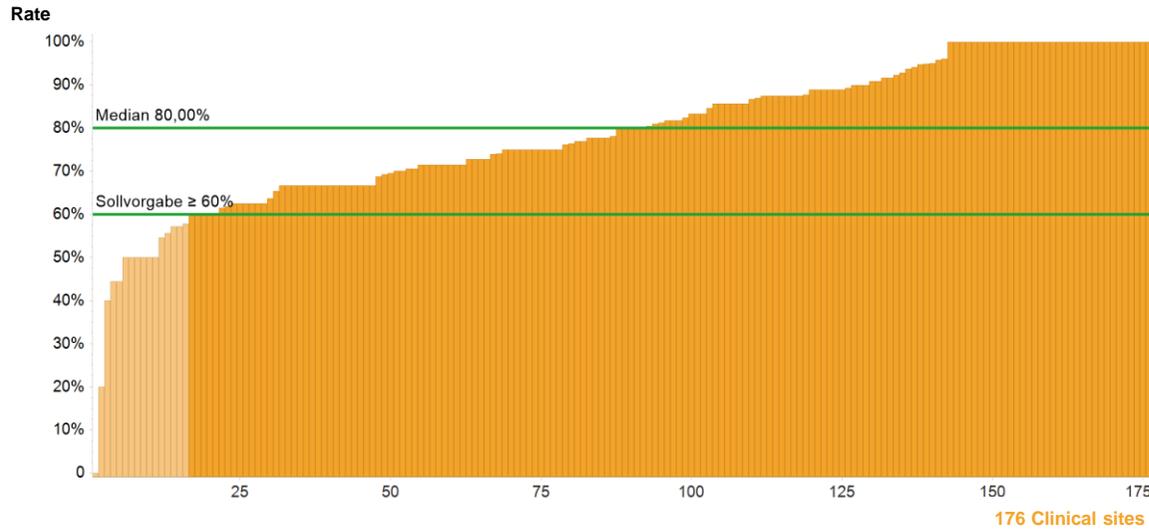
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
175	98.87%	174	99.43%

Comments:

Just like the previous QI, this QI also develops very well over time. 1 centre did not meet the target value because the information was not complete for 1 patient. The centre also did not meet the target value for Indicator 14. The auditor wrote a remark.

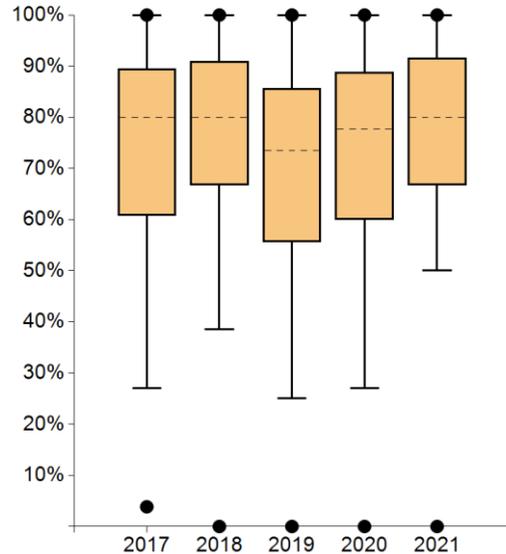
*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

16. Cytological/histological lymph node staging (GL cervix QI)



Sollvorgabe = target value

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with cytological/histological lymph node staging	7*	0 - 37	1617
Denominator	Primary cases cervical cancer FIGO stage ≥ IA2-IVA	9*	1 - 55	2032
Rate	Target value ≥ 60%	80.00%	0.00% - 100%	79.58%**



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	89.45%	90.91%	85.71%	88.89%	91.67%
Median	80.00%	80.00%	73.51%	77.78%	80.00%
25 th percentile	60.77%	66.67%	55.56%	60.00%	66.67%
5 th percentile	27.04%	38.50%	25.11%	27.00%	50.00%
● Min	3.85%	0.00%	0.00%	0.00%	0.00%

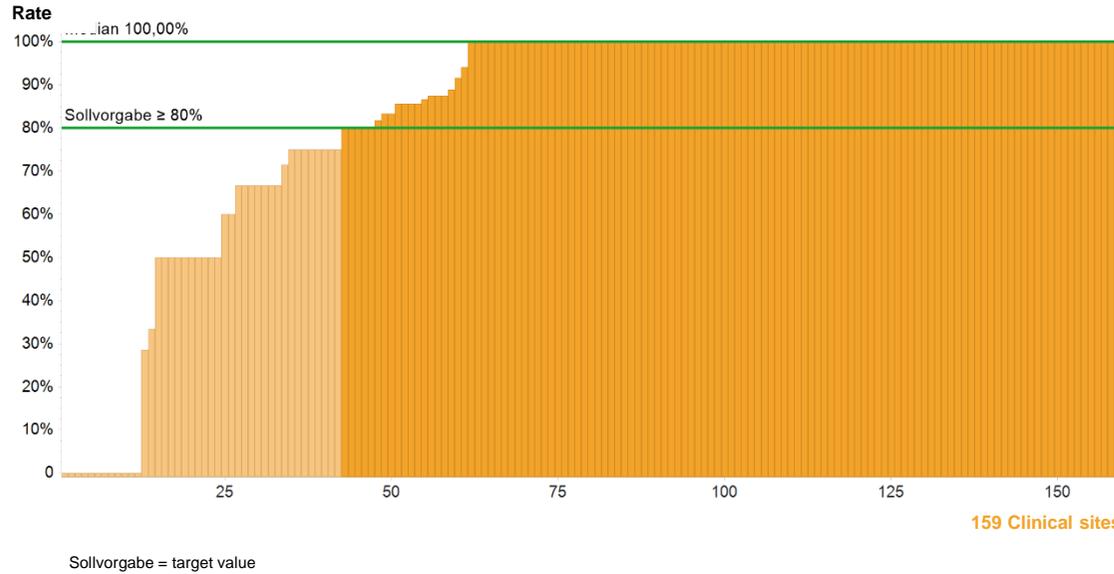
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
176	99,44%	160	90,91%

Comments:

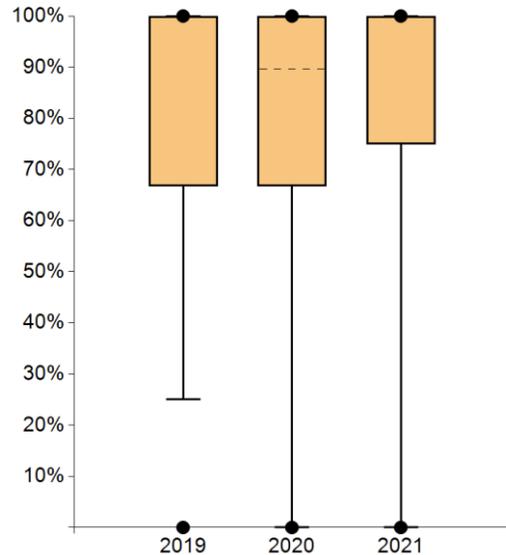
The QI shows a very good implementation with positive development over the last few years. The target value of 60% is only slightly missed by most of the 16 centres. With the exception of 2 centres, these deficient centres had better rates in the previous year. Reasons for the lack of staging are existing comorbidities and old age with frequently negative PET/CT. In addition, for high tumour stages, it is argued that a time delay due to surgical morbidity should be avoided before initiating subsequent therapy. The auditors have carried out very precise analyses of the cases and have assessed the procedure as plausible.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

17. Brachytherapy as a component of primary radio(chemo) therapy



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator in which brachytherapy was administered as part of primary radio(chemo) therapy	3*	0 - 32	595
Denominator	Primary cases with cervical cancer and primary radio(chemo) therapy, without primary distant metastasis	3*	1 - 34	676
Rate	Target value ≥ 80%	100%	0.00% - 100%	88.02%**



	2017	2018	2019	2020	2021
● Max	-----	-----	100%	100%	100%
95 th percentile	-----	-----	100%	100%	100%
75 th percentile	-----	-----	100%	100%	100%
Median	-----	-----	100%	89.59%	100%
25 th percentile	-----	-----	66.67%	66.67%	75.00%
5 th percentile	-----	-----	25.00%	0.00%	0.00%
● Min	-----	-----	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
159	89.83%	117	73.58%

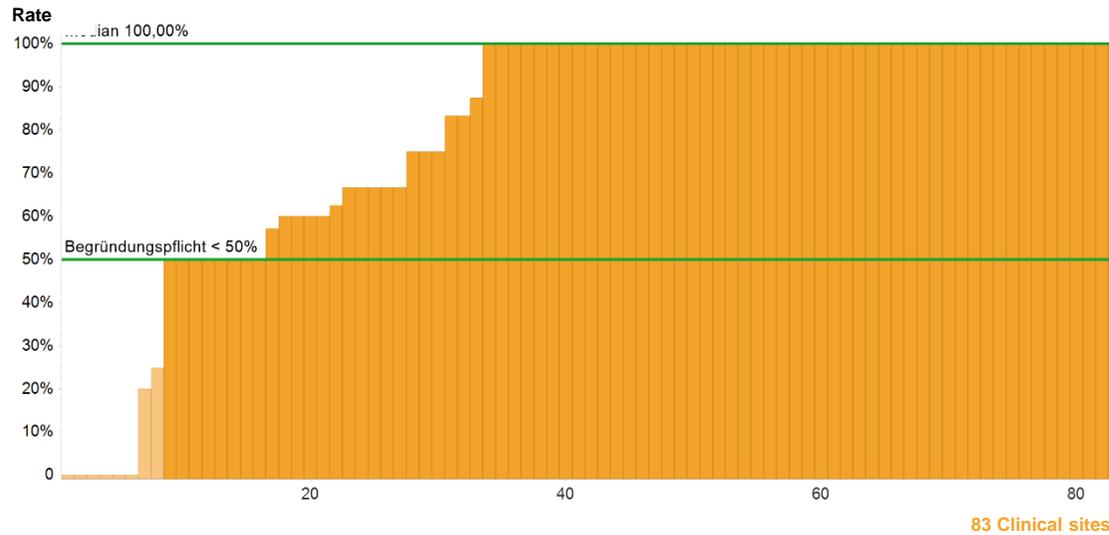
Comments:
 18 centres did not perform primary radio(chemo)therapy for primary cases with cervical cancer without distant metastases (denominator = 0). In 12 other centres, brachytherapy was not a component of primary radio(chemo)therapy (numerator = 0). The denominator in these centres was max. 2 patients. The reasons for not performing brachytherapy were infiltration of the neighbouring organs or pelvic LN involvement, rejection by the patient, technical implementation not possible, and poor general condition. The auditors discussed the individual cases.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

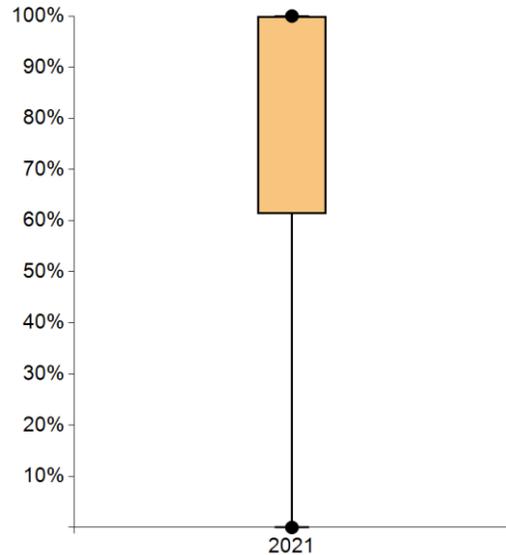
*** If value is outside the plausibility corridor, centres have to give an explanation.

18. Histological confirmation of local recurrence (GL cervix QI)



Begründungspflicht = mandatory statement of reasons

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Patients of the denominator with pre-therapeutic histological confirmation	2*	0 - 11	179
Denominator	Patients with cervical cancer and therapy of a local recurrence	2*	1 - 11	229
Rate	Mandatory statement of reasons*** < 50%	100%	0.00% - 100%	78.17%**



	2017	2018	2019	2020	2021
● Max	----	----	----	----	100%
95 th percentile	----	----	----	----	100%
75 th percentile	----	----	----	----	100%
Median	----	----	----	----	100%
25 th percentile	----	----	----	----	61,25%
5 th percentile	----	----	----	----	0,00%
● Min	----	----	----	----	0,00%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
83	46.89%	75	90.36%

Comments:

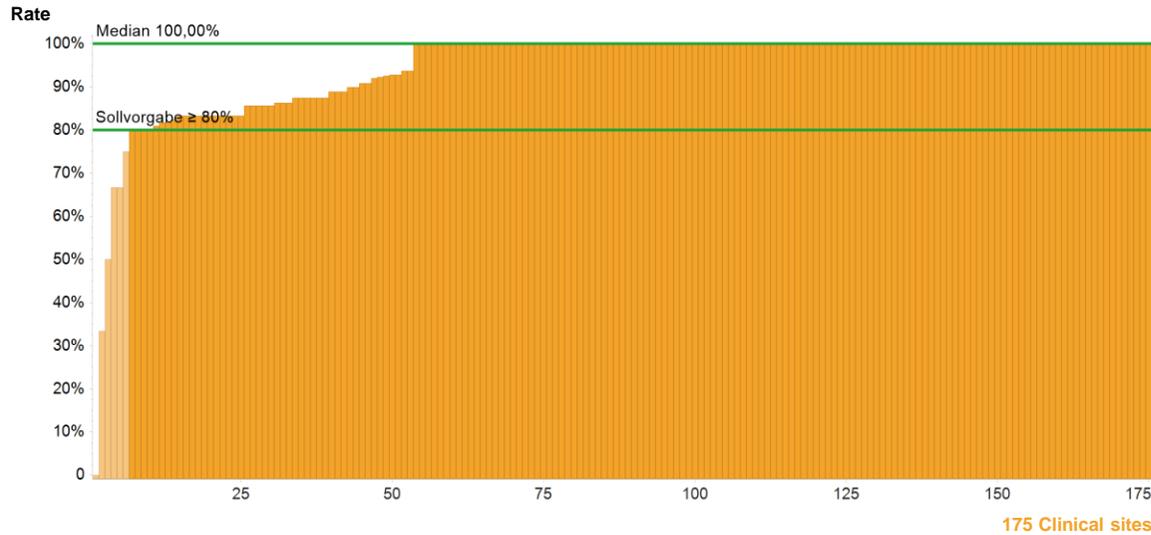
The QI was still provided voluntarily in the 2022 audit year. Information is available from 83 centres. 6 centres with a maximum of 2 patients in the denominator did not carry out a pre-therapeutic histological examination of the local recurrence. This was mainly justified by simultaneously existing distant metastases, implementation of best supportive care and intraoperative frozen section.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

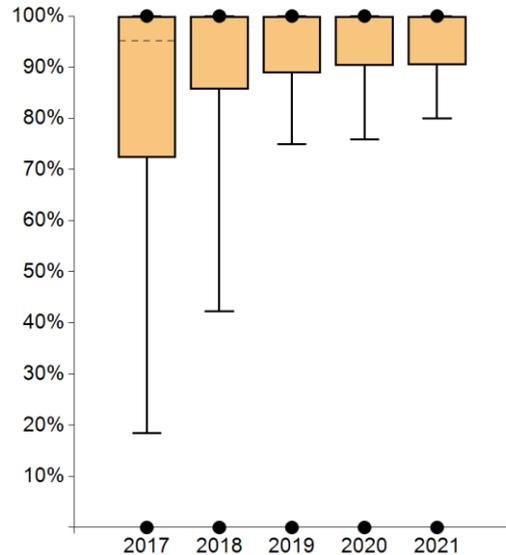
*** If value is outside the plausibility corridor, centres have to give an explanation.

19. Details in pathology report in the case of initial diagnosis and tumour resection (GL vulva QI)



Sollvorgabe = target value

	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with pathology reports (def. see indicator sheet)	6*	0 - 57	1367
Denominator	Primary cases vulvar cancer with tumour resection	7*	1 - 57	1452
Rate	Target value ≥80%	100%	0.00% - 100%	94.15%**



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	95.22%	100%	100%	100%	100%
25 th percentile	72.32%	85.71%	88.89%	90.24%	90.46%
5 th percentile	18.44%	42.29%	75.00%	75.83%	80.00%
● Min	0.00%	0.00%	0.00%	0.00%	0.00%

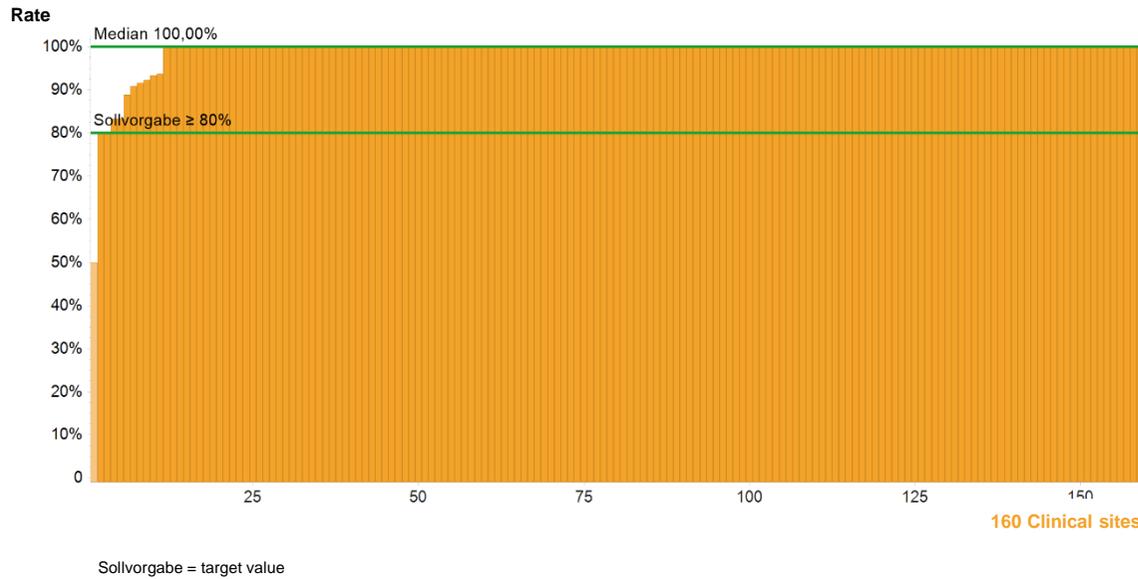
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
175	98.87%	169	96.57%

Comments:

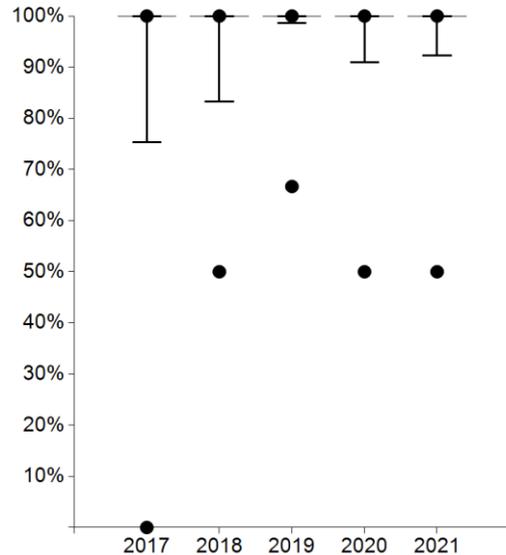
Analogous to the QI results "Pathology report for cervical cancer", this QI is also fulfilled very well and increasingly better by the centres. In the centres with ratio <80% the histology report were all complete except for one individual case. The reasons given by the centres were described by the auditors as plausible: among other things, no radical lymphadenectomy was carried out due to multimorbidity, no 3-dimensional measurement of the extent possible with a small tumour.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

20. Details in pathology report in the case of lymphonodectomy (GL vulva QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with complete information in the pathology report (def. see indicator sheet)	4*	1 - 54	876
Denominator	Primary cases vulvar cancer with lymphonodectomy	4*	1 - 54	888
Rate	Target value ≥80%	100%	50.00% - 100%	98.65%**



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 th percentile	100%	100%	100%	100%	100%
5 th percentile	75.33%	83.33%	98.69%	90.91%	92.28%
● Min	0.00%	50.00%	66.67%	50.00%	50.00%

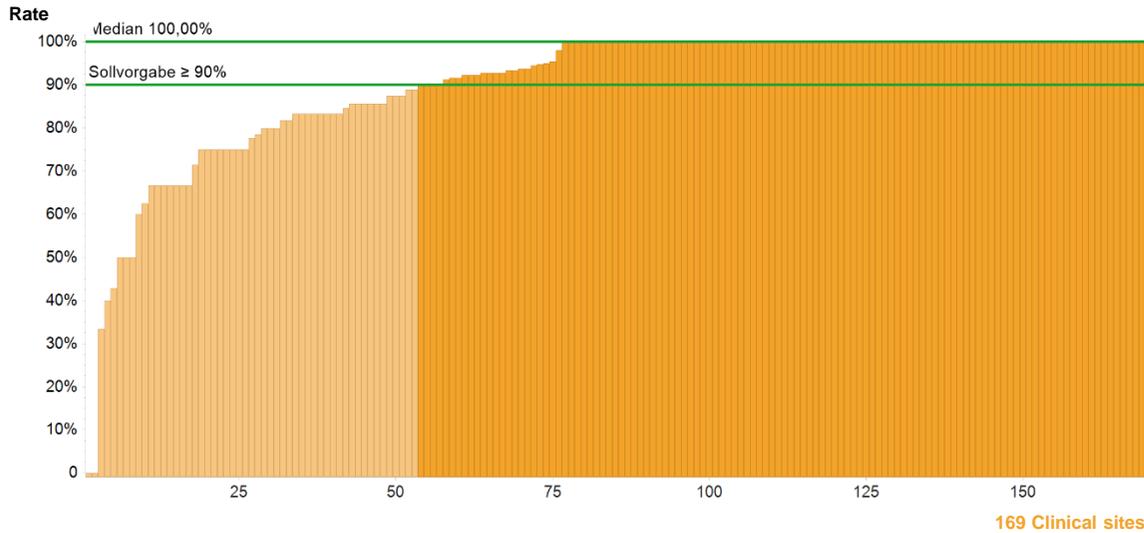
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
160	90.40%	159	99.38%

Comments:

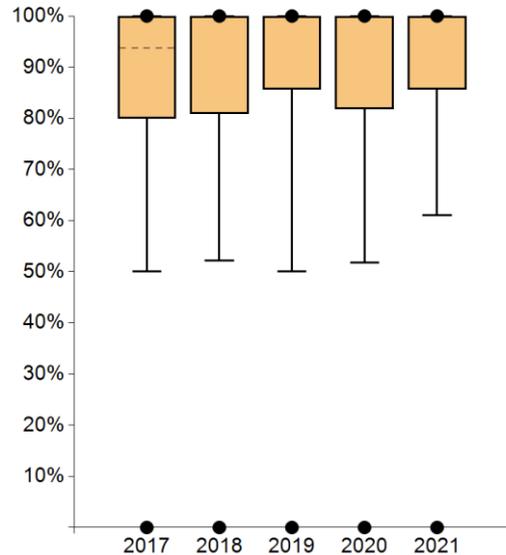
The QI of the GL has been implemented excellently for years. 1 centre does not fulfil the requirement. A new staff member in pathology had not yet been trained in all indications, so that information was missing. The introductory training was made up for.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

21. Conduct inguinofemoral staging (GL vulva QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with surgical staging (systematic lymphonodectomy and sentinel procedures) of inguinofemoral lymph nodes	5*	0 - 49	1066
Denominator	Primary cases of vulvar cancer ≥ pT1b (without basal cell cancer and without verrucous cancer)	5*	1 - 50	1172
Rate	Target value ≥ 90%	100%	0.00% - 100%	90.96%**



	2017	2020	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%	100%
Median	93.75%	100%	100%	100%	100%	100%
25 th percentile	80.00%	80.91%	85.71%	81.82%	85.71%	
5 th percentile	50.00%	52.14%	50.00%	51.79%	61.00%	
● Min	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

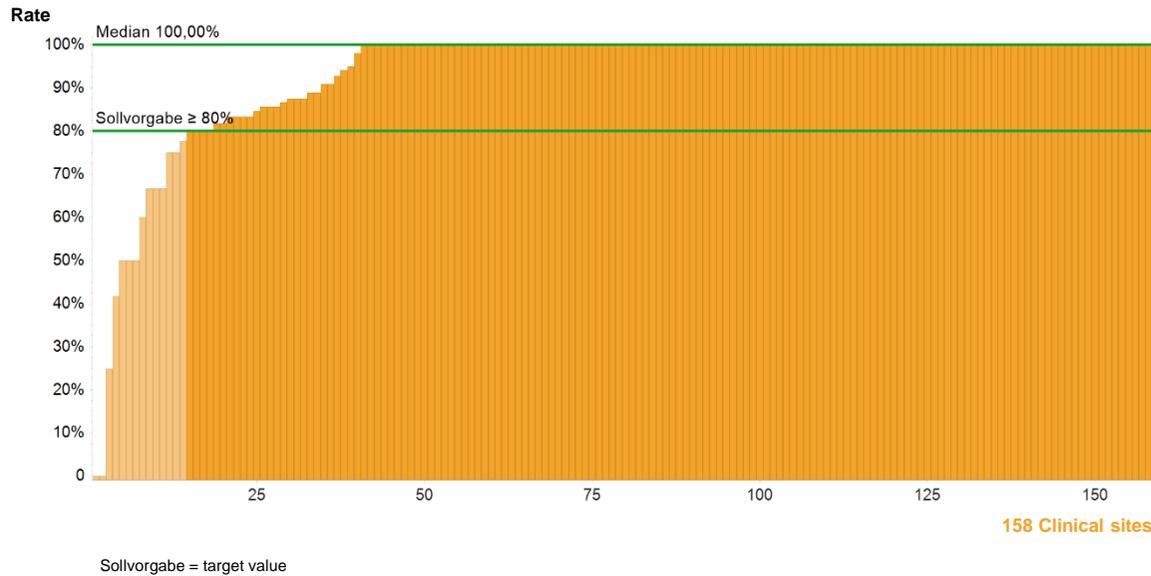
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
169	95.48%	116	68.64%

Comments:

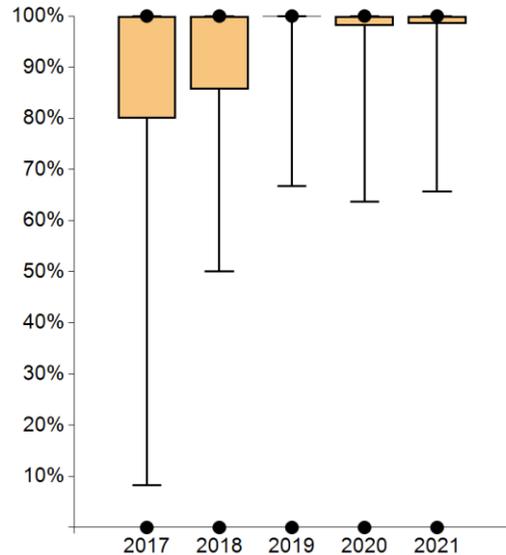
The QI remains almost unchanged over time. However, the results in a centre are not always the same, i.e. the centres that do not achieve the target value, for example, are not the same in every year. The reasons given for not reaching the target value are almost always the patient's age in connection with dementia and multimorbidity. In addition, palliative radiotherapy instead of surgery, other concurrent cancers and the patient's refusal of a LN-tagging were also mentioned.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

22. Sentinel lymph nodes biopsy (GL vulva QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with the described characteristics with sentinel surgery performed (def. see indicator sheet)	3*	0 - 48	717
Denominator	Primary cases vulvar cancer and sentinel lymph node biopsy.	3,5*	1 - 49	778
Rate	Target value ≥ 80%	100%	0.00% - 100%	92.16%**



	2017	2018	2019	2020	2021
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 th percentile	80.00%	85.71%	100%	98.08%	98.47%
5 th percentile	8.21%	50.00%	66.67%	63.64%	65.67%
● Min	0.00%	0.00%	0.00%	0.00%	0.00%

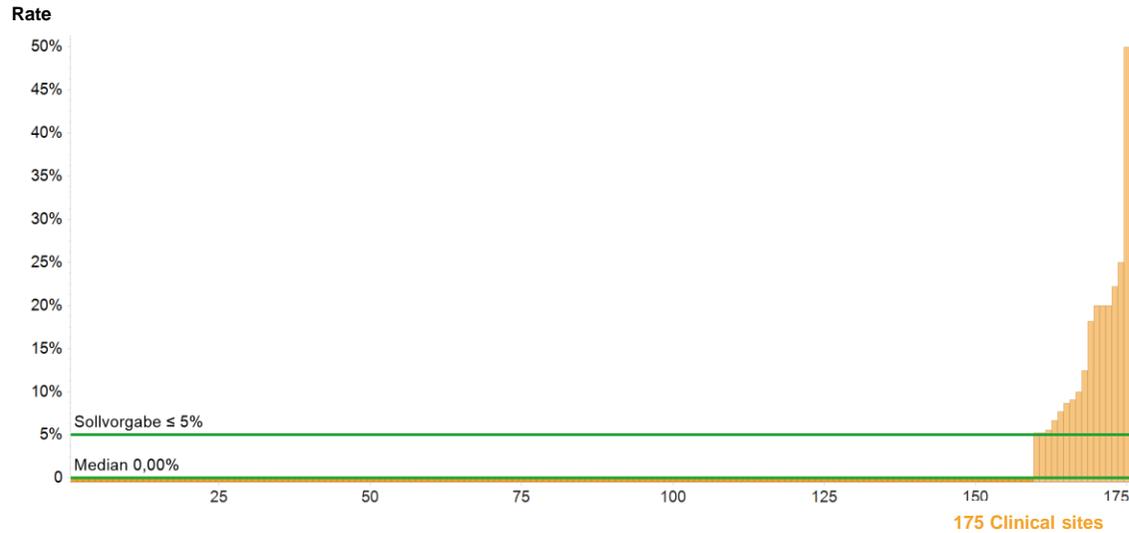
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
158	89.27%	144	91.14%

Comments:

The QI is implemented very well and increasingly better in the lower percentiles. Prerequisites for sentinel LN biopsy are: Clinical tumour size <4 cm and unifocal tumour and cNO and pathohistological findings. Ultrastaging of the lymph nodes if all sentinel lymph nodes are tumour-free in HE staining. 14 centres do not meet the target value. 1 centre justifies this with the fact that they previously carried out a complete work-up of the lymph nodes with light microscopic examination of the entire material, but ultrastaging has now been implemented. Frequent reasons for not meeting the target value were discrepancies between clinical and postoperative tumour size, lack of clinical tumour size and rejection by the surgeon. Tumour size and rejection by the patient. The auditors reviewed the cases in the audit.

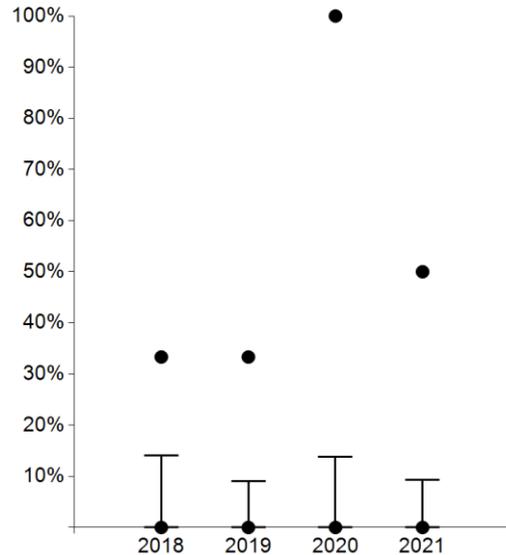
*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators
 ** Percentage of the total number of patients treated in centres according to the indicator.

23. Systematic lymphadenectomy (LNE) for type-I-endometrial carcinoma (GL Endo QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with systematic lymphadenectomy	0*	0 - 2	21
Denominator	Primary cases type I endometrial cancer (ICD-0: 8380/3, 8570/3, 8263/3, 8382/3, 8480/3) pT1a, G1/2, cN0	8*	1 - 33	1627
Rate	Target value ≤ 5%	0,00%	0.00% - 50.00%	1.29%**

Sollvorgabe = target value



	2017	2018	2019	2020	2021
● Max	-----	33.33%	33.33%	100%	50.00%
95 th percentile	-----	14.11%	9.09%	13.81%	9.36%
75 th percentile	-----	0.00%	0.00%	0.00%	0.00%
Median	-----	0.00%	0.00%	0.00%	0.00%
25 th percentile	-----	0.00%	0.00%	0.00%	0.00%
5 th percentile	-----	0.00%	0.00%	0.00%	0.00%
● Min	-----	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
175	98.87%	159	90.86%

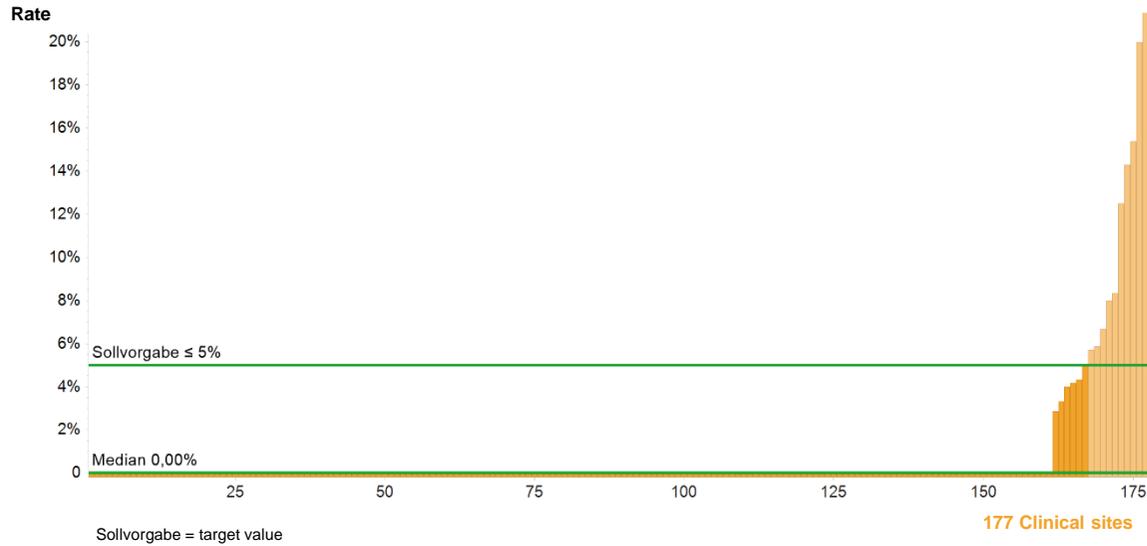
Comments:

The QI is very well implemented in the centres. Only 21 of 1627 eligible patients with type I endometrial carcinoma pT1a, G1/G2, cN0 received a systematic LNE. The centres justify the LNE primarily with preoperative suspicion of advanced carcinoma; with primary performance of a sentinel LNE (after prior clarification) with positive LN and subsequent LNE and intraoperatively conspicuous LN.

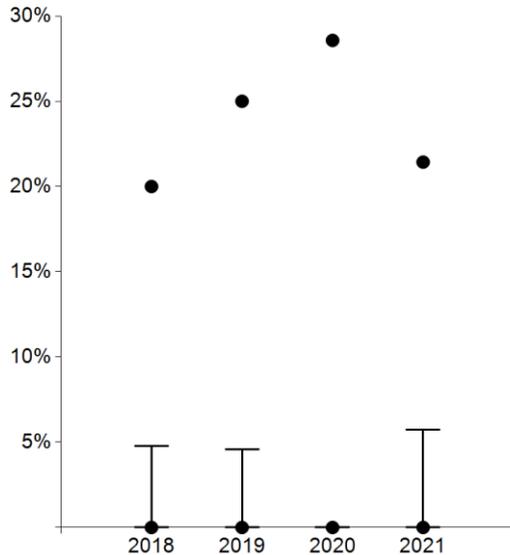
*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

24. Adjuvant chemotherapy for type-I-endometrial carcinoma (GL Endo QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with adjuvant chemotherapy	0*	0 - 3	23
Denominator	Primary cases Type I endometrial cancer (ICD-0: 8380/3, 8570/3, 8263/3, 8382/3, 8480/3) pT1a/b G1 cN0/pN0 o. pT1a/b G2 cN0/pN0	13*	1 - 40	2470
Rate	Target value ≤ 5%	0.00%	0.00% - 21.43%	0.93%**



	2017	2018	2019	2020	2021
Max	-----	20.00%	25.00%	28.57%	21.43%
95 th percentile	-----	4.76%	4.57%	0.00%	5.74%
75 th percentile	-----	0.00%	0.00%	0.00%	0.00%
Median	-----	0.00%	0.00%	0.00%	0.00%
25 th percentile	-----	0.00%	0.00%	0.00%	0.00%
5 th percentile	-----	0.00%	0.00%	0.00%	0.00%
Min	-----	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
177	100.00%	167	94.35%

Comments:

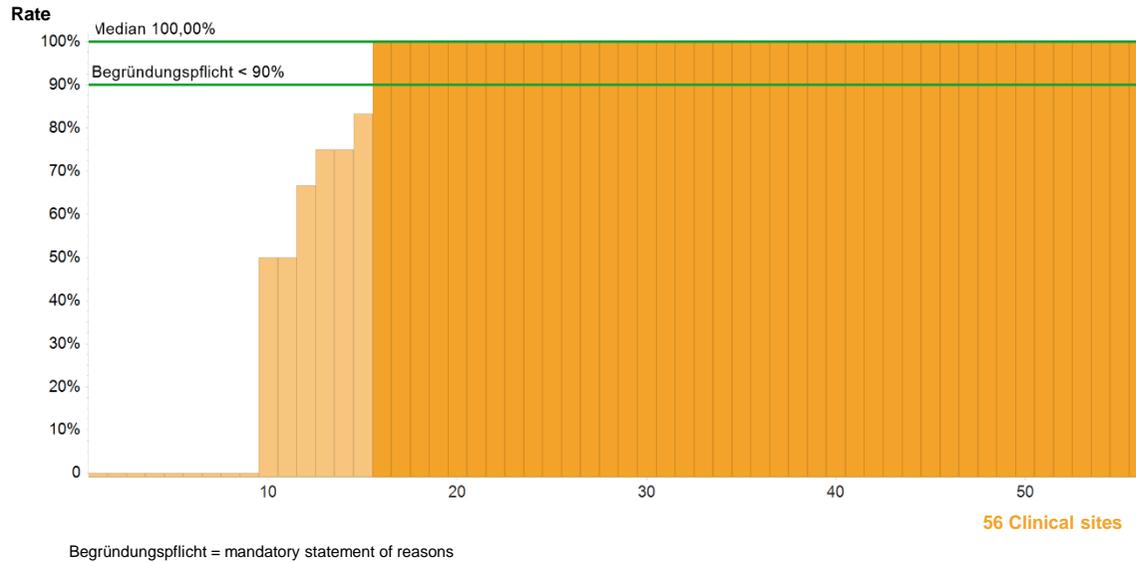
The QI is implemented very well and almost unchanged. The centres that exceeded the target value did not have any abnormalities in the last audit year. The implementation of adjuvant chemotherapy is justified by: Patients enrolled in a study (ECLAT study), molecular pathological abnormalities (p53, L1CAM), simultaneous ovarian cancer. The auditors looked at the individual cases.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

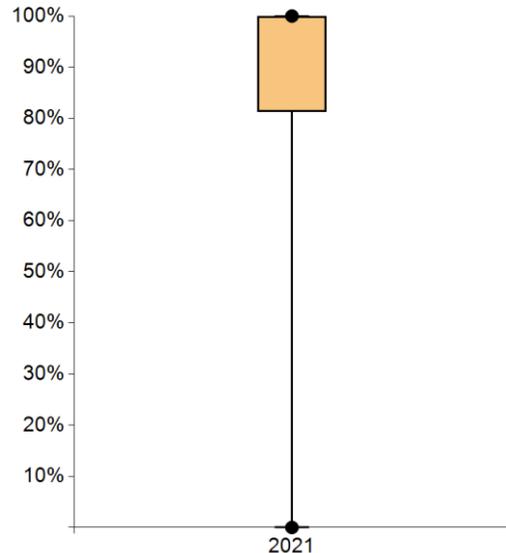
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

25a. Hysterectomy without morcellement for sarcoma confined to the uterus (in the centre) (GL Sarkom QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with hysterectomy without morcellement	1*	0 - 8	107
Denominator	Primary cases operated on at the centre with sarcoma confined to the uterus (ICD-O T C54, C55 iVm morphology codes sarcoma centres), M0 with hysterectomy	2*	1 - 8	130
Rate	Mandatory statement of reasons*** < 90%	100%	0,00% - 100%	82,31%**



	2017	2018	2019	2020	2021
● Max	----	----	----	----	100%
95 th percentile	----	----	----	----	100%
75 th percentile	----	----	----	----	100%
Median	----	----	----	----	100%
25 th percentile	----	----	----	----	81.25%
5 th percentile	----	----	----	----	0.00%
● Min	----	----	----	----	0.00%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
56	31.64%	41	73.21%

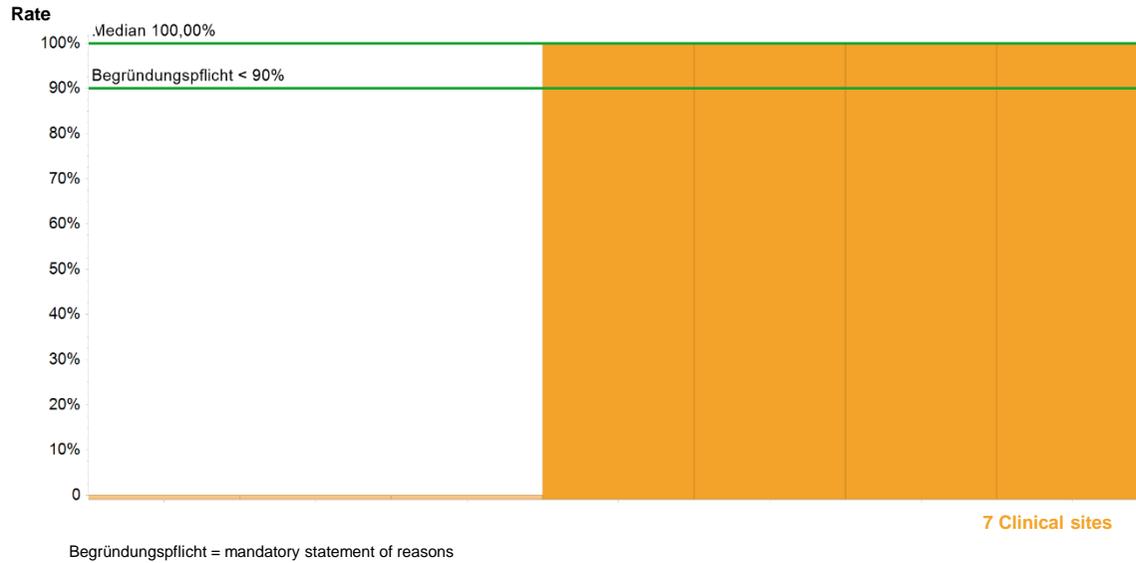
Comments:
 QIs 25 a. and b. were taken from the GL Sarkoma. In audit year 2022, the information was still voluntary, so that information is only available from 56 centres. 41 centres are within the plausibility limits and have only performed hysterectomies without morcellement. The other centers justified their quotas mainly on misinterpreting the requirement. This will be addressed with the issuance of an FAQ. In the cases with morcellement, the surgical indication was uterus myomatosus without remark of malignant findings.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

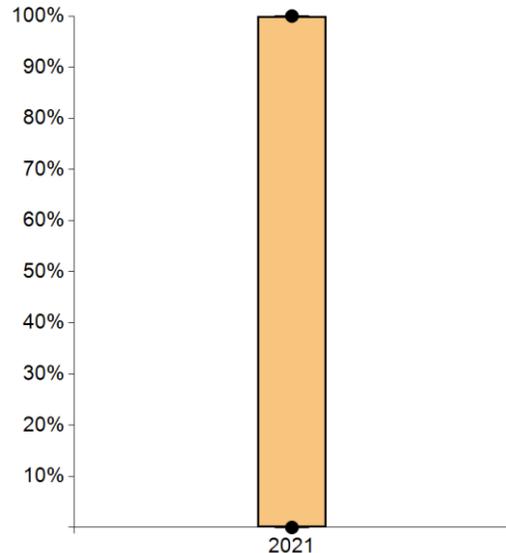
** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

25b. Hysterectomy without morcellation for sarcoma confined to the uterus (outside the centre) (GL Sarkom QI)



	Indicator definition	All clinical sites 2021		
		Median	Range	Patients Total
Numerator	Primary cases of the denominator with hysterectomy without morcellation	1*	0 - 3	7
Denominator	Primary cases operated on outside the centre with sarcoma confined to the uterus (ICD-O T C54, C55 iVm morphology codes sarcoma centres), M0 with hysterectomy	1*	1 - 3	12
Rate	Mandatory statement of reasons*** < 90%	100%	0.00% - 100%	58.33%**



	2017	2018	2019	2020	2021
● Max	----	----	----	----	100%
95 th percentile	----	----	----	----	100%
75 th percentile	----	----	----	----	100%
Median	----	----	----	----	100%
25 th percentile	----	----	----	----	0.00%
5 th percentile	----	----	----	----	0.00%
● Min	----	----	----	----	0.00%

Clinical sites with evaluable data		Clinical sites within the plausibility limits	
Number	%	Number	%
7	3.95%	4	57.14%

Comments:
See previous Indicators. The same justifications apply to this Indicator.

*The medians for numerator and population do not refer to an existing centre but indicate the median of all cohort numerators and the median of all cohort denominators

** Percentage of the total number of patients treated in centres according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

WISSEN AUS ERSTER HAND (FIRST-HAND KNOWLEDGE)



Find out more on www.krebsgesellschaft.de

Autoren

German Cancer Society (DKG)
German Society for Gynaecology and Obstetrics e.V.
Working Group for Gynaecological Oncology e.V.
Certification Commission Gynaecological Cancer Centres
Mathias W. Beckmann, Spokesman Certification Committee
Christian Dannecker, Spokesman Certification Committee
Simone Wesselmann, (DKG)
Johannes Rückher, (DKG)
Martin Utzig, (DKG)
Ellen Griesshammer (DKG)
Nele Grapentin (DKG)
Agnes Bischofberger, OnkoZert
Florina Dudu, OnkoZert

Imprint

Publisher and responsible for content:
Deutsche Krebsgesellschaft (DKG)
Kuno-Fischer-Straße 8
14057 Berlin
Tel.: +49 (030) 322 93 29 0
Vereinsregister Amtsgericht Charlottenburg,
Vereinsregister-Nr.: VR 27661 B
V.i.S.d.P.: Dr. Johannes Bruns

in cooperation with:
OnkoZert, Neu-Ulm
www.onkozert.de

Version e-A1-en; 26.05.2023

ISBN: 978-3-910336-37-7

